SEC For	rm 4																		
FORM 4 UNIT				ED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549															
										_								3235-0287	
Check this box if no longer subject to STA					STATEMENT OF CHANGES IN BENEFICIAL OWNERS										OMB Number: 3235-0287 Estimated average burden				
	tions may conti ation 1(b).	nue. See		F							rities Excha Company Ac		1934		hours	s per res	sponse:	0.5	
1. Name ar	nd Address of	Reporting Person	r		2.	Issue	r Nam	e and Tio	cker or Tra	ading	Symbol			elationship c		ng Pers	on(s) to Iss	uer	
<u>SLJ Dynasty Trust</u>					G	Goosehead Insurance, Inc. [GSHD]								Check all applicable) Director X 10% Owner					
-					- 3	Date	of Far	liest Tran	saction (N	Month	n/Day/Year)			Officer	(give title	Х	Other (
(Last) (First) (Middle)						1/27/2		liber fran						below) A below) Member of 10% owner group					
1500 SOLANA BOULEVARD STE 4500				4 If Amendmen				ent, Date of Original Filed (Month/Day/Year)					6 Ir	6. Individual or Joint/Group Filing (Check Applicable					
<u> </u>					_ 4.	II AIII	enume	eni, Dale	or Origina			ay/rear)	Line	e)					
(Street) WESTLAKE TX 76262				Form filed by One Re X Form filed by More the Person											•	•			
						lule	10b	5-1(c) Tran	sac	tion Inc	dication	I						
(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Та	ble I - No	on-Der	ivativ							. ,		y Owned					
1. Title of Security (Instr. 3)				2. Tran	saction		2A. De		3. Trans	3. 4 Transaction D		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amount of Securities			7. Nature of Indirect	
				Date (Month/Day/Yea		ear) Execution Date, if any (Month/Day/Year)			Code				1. 5, 4 and 5	Beneficially Owned Foll		(D) or	r Indirect 🛛 🛛	Beneficial Ownership	
								-	Code	v	Amount	(A) or	Price	Reported Transact	ion(s)			(Instr. 4)	
Class B Common Stock				11/27/2023					с		28,00	(D) 0 D	\$0	(Instr. 3 a	,246	D ⁽¹⁾			
Class A Common Stock				11/27/2023					С	┢	28,00	0 A	\$0	28,	000	D ⁽¹⁾			
Class A Common Stock				11/27/2023					S	┢	27,70	0 D	\$74.47	(2) 3	00		D ⁽¹⁾		
Class A Common Stock				11/27/2023					s	┢	300	D	\$74.99)	0	\vdash	D ⁽¹⁾		
Class B Common Stock				11/2//2020						┢				370	,442	D ⁽³⁾			
						+			+	┢			+		,	-	-	SLJ 2023	
																		Grantor	
Class B Common Stock														161	,094			Retained Annuity	
																		Trust	
			Table II								posed of			Owned					
1. Title of	2.	3. Transaction	3A. Deem		puts 4.	, cai	-	lumber		-	convert	7. Title an	-	8. Price of	9. Numb	er of	10.	11. Nature	
Derivative Security (Instr. 3) Conversion Or Exercise Price of Derivative Security			Execution Date, T ar) if any C		Transa Code		on of r. Derivative		Expiration (Month/E	on Da	te	of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	derivativ Securitie	re es	Ownership Form:	of Indirect Beneficial	
			(Month/Day/Year) 8)					urities quired						(Instr. 5)	Beneficia Owned Followin	-	Direct (D) or Indirect (I) (Instr. 4)	ct (Instr. 4)	
							Dis	posed D) (Instr.							Reported	d tion(s)	(i) (iiisu. 4)	'	
								and 5)						-	(Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
LLC Units						\vdash	+			_				1				+	
in Goosehead Financial,	\$0	11/27/2023			С			28,000	(5)		(5)	Class A Common Stock	28,000	\$0	151,2	.46	D ⁽¹⁾		
LLC LLC Units						-	+			_									
in Goosehead Financial,	\$0								(5)		(5)	Class A Common Stock	370,442		370,4	42	D ⁽³⁾		
LLC Units						<u> </u>	+		<u> </u>	_								SLJ 2023	
in Goosehead	\$0					(5)	(5) (5) Class A Common 10			161,094	161,09		94	(4)	Grantor Retained				
Financial, LLC											Stock			101,0		1.7	Annuity Trust		
								1	<u> </u>			1		1	I				
 INAME ar 	iu Address of	Reporting Person																	

SLJ Dynasty Trust

(Last) (First) (Middle) 1500 SOLANA BOULEVARD STE 4500

TX

(Street) WESTLAKE

76262

(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] Jones Serena								
	(First) D INSURANCE, INC JVD., BLDG 4, STE 4							
(Street) WESTLAKE	ТХ	76262						
(City)	(State)	(Zip)						

Explanation of Responses:

1. Reflects shares of Class A Common Stock, shares of Class B Common Stock or LLC Units, as applicable, held directly by the SLJ Dynasty Trust, in which Serena Jones has a pecuniary interest.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$73.95 to \$74.86, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote to this Form 4.

3. Reflects shares of Class A Common Stock, shares of Class B Common Stock or LLC Units, as applicable, held directly by Serena Jones.

4. Reflects shares of Class B Common Stock or LLC Units, as applicable, held indirectly by Serena Jones, who serves as a trustee and whose immediate family members are beneficiaries of SLJ 2023 Grantor Retained Annuity Trust.

5. Each LLC Unit, together with a share of Class B Common Stock, may be converted by the holder into one share of Class A Common Stock at any time. The LLC Units do not expire.

 /s/ John O'Connor, Attorney-in-Fact for SLJ Dynasty Trust
 11/29/2023

 /s/ John O'Connor, as Attorneyin-Fact for Serena Jones
 11/29/2023

 ** Signature of Reporting Person
 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.