FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vvasiiiigtoii,	D.C.	20549	

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average	Estimated average burden									
hours per respons	se: 0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* <u>Langston Patrick Ryan</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Goosehead Insurance, Inc. [ GSHD ]						(CI	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						
	LANA BL	VD	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/11/2020								A below		neral (	below)	респу
(Street) WESTLA		x :	76262 Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year) 05/13/2020						6. l	e) X Forn	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
(Oity)	(0			on Doris	rotivo	Cool	.viti		nuiro.	4 Di	anacad of	or D	onoficia	Illy Over				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)			tion	on 2A. Deemed Execution Date,		quired, Disposed of, or B  3.		d (A) or	5. Am Secur Bener	5. Amount of Securities Beneficially		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)		
Class A Common Stock 05/11/20				2020	20			M		11,566	A	\$10	4	48,703		D		
Class A Common Stock 05/11/20				2020	)20		S		11,566(1)	D	\$61.30	62 3	7,137		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	tion Date,		ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exer ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Options (right to	\$10	05/11/2020			М			11,566	(	(2)	04/26/2028	Class A Stock	11,566	\$0	88,434	1	D	

## Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$61.00 to \$62.38, 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.
- 2. One third (1/3rd) of the option, which represents the right to purchase a total of 120,000 shares, shall vest and become exercisable, subject to continued employment, on each of the second, third and fourth anniversaries of the grant date, which was April 26, 2018; provided, that all shares subject to the option will vest and become exercisable if Mr. Langston's employment is terminated without "cause" or for "good reason" (each as defined in either Mr. Langston's option award agreement or the issuer's omnibus incentive plan) within six month following a "change in control" (as defined in the issuer's omnibus incentive plan).

## Remarks:

/s/ P. Ryan Langston

05/19/2020

\*\* 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.