## FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*  Mark & Robyn Jones Descendants Trust  2014  (Last) (First) (Middle)  C/O GOOSEHEAD INSURANCE, INC.  1500 SOLANA BLVD., BLDG 4, STE 4500  (Street)  WESTLAKE TX 76262  (City) (State) (Zip)					3. D 05/	2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]  3. Date of Earliest Transaction (Month/Day/Year) 05/06/2019  4. If Amendment, Date of Original Filed (Month/Day/Year)								(Chec	, , , , , , , , , , , , , , , , , , ,				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				tion	ion 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8) 4. Securitie Disposed C		es Acquired (A) o Of (D) (Instr. 3, 4 a		or and 5)	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Class A Common Stock 05/06/2								S	V	Amount 11,937 33,357	(D) D	\$3	3.74 <sup>(1)</sup> 4.79 <sup>(2)</sup>	(Instr. 3 and 4) 74 <sup>(1)</sup> 1,687,862		D D			
Class A Common Stock 05/06/2 Class A Common Stock 05/06/2								S		100	D	_	35.39		654,405	D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  1. Title of   2.   3. Transaction   3A. Deemed   4.   5. Number   6. Date Exercisable and   7. Title and   8. Price of   9. Number of   10.   11. Nature																			
Security or Exercise (Month/Day/Year) if a				on Date, Transa Code ( Bay/Year)			of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			Amount of Securities Underlying Derivative Security (Instr. and 4)  Amour or Numbe of Title Shares		Sec (Ins	ivative urity tr. 5)	derivative Securities Seneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

### **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 \$33.310 to \$34.31, 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. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.32 to \$35.27, 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.

#### Remarks:

The sales reported were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

/s/ P. Ryan Langston, as Attorney-in-Fact for Mark and Robyn Jones Descendants

05/07/2019

Trust 2014

\*\* 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.