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
I

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 Instruction 1(b) or Section 30(h) of the Investment Company Act of 1940

							. ,				' '									
1. Name and Address of Reporting Person* Jones Mark Evan				2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
JOHES MARK EVAII												X Direc	ctor		X 10	% Owner				
(Last)	(F	irst) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)								X Officer (give below)		tle		her (specify low)			
C/O GOO	OSEHEAD	INSURANCE, I	NC.		12/03/2019								CEO / Member of 10% owner group							
		VD., BUILDING		.nn																
		VD., BOILDING	-, 01L -c		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)					(Line)						
WESTLA	AKE T	X 7	6262											X Form filed by One Reporting Person						
														Form filed by More than One Reporting Person						
(City)	(S	tate) (Zip)																	
		Tabl	e I - Non	Deriva	tive	Sec	uritie	s Acc	quire	ed, D	Disposed	of, o	r Benef	icial	ly Own	ed				
Dat		2. Trans Date (Month	saction /Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		on D					Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Cod	le V	А	mount	(A) or (D)	Price			ported Insaction(s) str. 3 and 4)			(Instr. 4)		
Class A Common Stock			12/0	3/2019	9		:				5,500	D	\$40.2666(1)		378,359		I		By Mark and Robyn Jones Descendants Trust 2014	
Class A Common Stock ⁽²⁾						7:		725,801		D										
		Та	ble II - D								sposed o				Owned					
Derivative Conversion [3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Oate, T C /Year) 8	4. Transaction Code (Instr. 8) Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5) Code V (A) (Expiration (Month/E) titles red sed 3, 4		ation th/Day	Day/Year) Expiration		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		3. Price of Derivative Security Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re es ally g	10. Ownersi Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ect (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 \$40.05 to \$40.72, 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. This does not reflect shares directly held by the reporting person's spouse, who is independently a reporting person of the issuer.

Remarks:

The sales reported were effected pursuant to a Rule 10b5-1 trading plan adopted by the Mark and Robyn Jones Descendants Trust 2014.

/s/ P. Ryan Langston, as Attorney-in-Fact for Mark

12/04/2019

Evan Jones

** 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.