## SEC Form 5

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## FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0362								

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Check	this box if no lo	onger subject			, and a second								OMB A	APPRO	VAL
to Sec obligat Instruc	tion 16. Form 4 ions may contin tion 1(b). 3 Holdings Rep	or Form 5 nue. <i>See</i>	ANNUAL	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							Esti	OMB Number: 3235-0362 Estimated average burden hours per response: 1.0			
	Transactions		Filed	l pursuant to Sec											
1. Name and Address of Reporting Person* Colby Michael C.			<ul> <li>or Section 30(h) of the Investment Company Act of 1940</li> <li>2. Issuer Name and Ticker or Trading Symbol</li> <li><u>Goosehead Insurance, Inc.</u> [GSHD]</li> </ul>					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				wner		
		st) (I INSURANCE, /D., BUILDINC		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021						//Year)	X Officer (give title Other (s below) President and COO				specify
(Street) WESTL	ΑΚΕ ΤΣ		6262	4. If Amendment, Date of Original Filed (Month/Day/Year)						<ul> <li>S. Individual or Joint/Group Filing (Check Applicable ine)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>				on	
(City)	(St		Zip)				- Diama			Demofiei		l			
1. Title of Security (Instr. 3) 2. Da		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transact Code (In	tion					-	nt of es ally	6. Owners Form: D (D) or	hip Ind irect Ber	7. Nature of Indirect Beneficial Ownership	
				(month/Day/real			Amount	(A (D	) or )	Price	Issuer's		Indirect (Instr. 4)	(I) (Ins	str. 4)
Class A Common Stock		01/11/2022		<b>G</b> <sup>(1)</sup>		250		D	\$ <mark>0</mark>	22,881		D			
Class A Common Stock		01/11/2022		<b>G</b> <sup>(1)</sup>		250		D	\$ <mark>0</mark>	0 22,631 D					
Class A Common Stock										83,402 I		20 Fa	By Colby 2014 Family Trust		
		Tal	ble II - Derivat (e.g., pu	ive Securitie uts, calls, wa								d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	. Number	- 6. Date Expira	e Exercisab ation Date h/Day/Year)	le and	7. Ti Amo Sec Und Deri	itle and ount of urities erlying vative urity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported	e O s F ully D o g ([	). wnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)

**Explanation of Responses:** 

1. This transaction involved two equal gifts of securities by the reporting person. The total holdings reflected in the Forms 4 filed by the reporting person subsequent the date of the gifts reported hereby will be reduced to reflect such gifts.

(D) (A)

Date

Exercisable

Expiration Date

**Remarks:** 

/s/ P. Ryan Langston, as Attorney-in-Fact for Michael 02/14/2022 C. Colby

or Number

of Shares

Title

\*\* 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.