FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CH	IANGES	IN B	ENEF

	OMB APP	'ROVAL		
ICIAL OWNERSHIP	OMB Number:	3235-0287		
OIAL OWNEROUM	11			

Estimated average burden hours per response: 0.5

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						2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director X 10% Own Officer (give title X Other (sp				wner (specify
	SEHEAD	INSURANCE, I				3. Date of Earliest Transaction (Month/Day/Year) 12/17/2019								Member of 10% owner group					
1500 SOLANA BLVD., BLDG 4, STE 4500 (Street) WESTLAKE TX 76262				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate) ((Zip)												Pers	son			
		Tabl	le I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or	Bene	ficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			5) Secui Bene	ficially d Following	Forn (D) c	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) (D)	or F	rice	Trans	action(s) 3 and 4)	ction(s)		(11150.4)		
Class A Common Stock 12/17/2				2019	.019		S		39,874	I		641.5	4 ⁽¹⁾ 2	212,709		D			
Class A Common Stock 12/17/2			2019		S		18,598 D \$4		641.9	9 ⁽²⁾ 1	194,111		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)	erivative conversion or Exercise (Month/Day/Year) str. 3) Price of Derivative Security Execution Date, if any (Month/Day/Year) (Month/Day/Year)		4. Transa Code (8)				6. Date Expirati (Month/	ion Da Day/Y		Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of		ount ober	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect 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 \$40.86 to \$41.86, 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.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$41.87 to \$42.47, 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 &
Robyn Jones Descendants
Trust 2014

12/19/2019

** 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.