FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	STATEMENT	OF CH	ANGES	IN BEN	EFICIAL	OWNERS	HIP
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OMB APPROVAL

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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

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]									cable) or (give title	g Pers	10% Ov	vner	
(Last) (First) (Middle) C/O GOOSEHEAD INSURANCE, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2019								Member of 10% owner group					
1500 SOLANA BLVD., BLDG 4, STE 4500					4. 1	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) WESTLA	AKE T	TX 76262												Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	tate)	(Zip)																
		Tab	le I - No	n-Deri	vativ	e Sec	curit	ies Ac	quired	, Dis	sposed o	f, or Be	neficiall	y Owned					
			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities A		es Acquired (A) or Of (D) (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Class B Common Stock 02/01/.			L/2019				С		20,315	D	\$0	12,9	79,024		D				
Class A Common Stock 02/01/2			L/ 2019	2019		С		20,315	A	\$0	1,76	1,768,596		D					
Class A Common Stock 02/01/2				L/2019	2019		S		20,315	D	\$28.24	1,748,281			D				
		ר	Γable II ·								osed of, convertil			Owned					
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	ion Date, Tra				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
LLC Units in Goosehead Financial, LLC	\$0.0	02/01/2019			С			20,315	(2)		(2)	Class A Common Stock	20,315	\$0	12,979,0)24	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 \$27.64 to \$28.77, 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. Each LLC Unit, together with a share of Class B Common Stock, may be converted by the holder into one share of Class A Common Stock at any time. The LLC Units do not expire.

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

** 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.