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).

## OMB APPROVAL 3235-0287 OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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

Name and Address of Reporting Person*     Coleman Desiree						2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [ GSHD ]									tionship all appli Directo	cable)	son(s) to Is:			
(Last) (First) (Middle) C/O GOOSEHEAD INSURANCE, INC. 1500 SOLANA BLVD., BLDG 4, STE 4500						3. Date of Earliest Transaction (Month/Day/Year) 06/25/2020								Officer (give title X Other (specify below)  Member of 10% owner group						
(Street) WESTLA			76262 (Zip)		4. If Amendment, Date				e of Original Filed (Month/Day/Year)					6. Indiv Line) X	Form f Form f Form f Persor					
		Tab	le I - 1	Non-Deriv	/ative	e Sec	uriti	ies A	cquire	ed, D	isposed o	of, or B	enefic	ially	Owned	t L				
1. Title of Security (Instr. 3)		2. Transacti Date (Month/Day	Year) Execu		Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	5. Amount of Securities 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	ction(s)			(Instr. 4)		
Class B C	ommon Sto	ock		06/25/20	020				С		1,800	D	\$(	)	48	2,354	D			
Class A C	Common Sto	ock		06/25/20	020				С		1,800	A	\$(	)	1,800 D					
Class A C	Common Sto	ock		06/25/20	020				S		1,800	D	\$75.02	218(1)	B <sup>(1)</sup> 0 D					
		Т	able I								posed of				wned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		Date Exe (Month/Day/Year) if ar		eemed tion Date, h/Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		ate Amount		De Se (In	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er						
LLC Units in Goosehead Financial	\$0.0	06/25/2020			С			1,800	(	2)	(2)	Class A Commo	1	0	\$0	482,35	4	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 \$75.00 to \$75.12, 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 Desiree 06/29/2020

Coleman

\*\* 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.