Continental Insurance, Inc. Form 4

December 27, 2018

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

subject to Section 16. Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. See Instruction

**SECURITIES** 

30(h) of the Investment Company Act of 1940

1(b).

(Last)

Security

(Instr. 3)

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* Continental Insurance Group, Ltd.

> (First) (Middle)

450 PARK AVENUE, 30TH **FLOOR** 

NEW YORK, NY 10022

(Street)

4. If Amendment, Date Original

Filed(Month/Day/Year)

2. Issuer Name and Ticker or Trading Symbol

INSEEGO CORP. [INSG]

3. Date of Earliest Transaction (Month/Day/Year)

12/19/2018

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director \_ 10% Owner Other (specify Officer (give title below)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Applicable Line)

5. Amount of

Securities

Following

Owned

Beneficially

Form filed by One Reporting Person X\_ Form filed by More than One Reporting

> 6. Ownership

6. Individual or Joint/Group Filing(Check

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

(City) (State) (Zip)

1.Title of 2. Transaction Date 2A. Deemed

12/19/2018

(Month/Day/Year)

4. Securities Acquired (A) 3. Execution Date, if Transaction Disposed of (D) Code (Month/Day/Year)

Code V

S

(Instr. 8)

(Instr. 3, 4 and 5) (A)

Amount

11,473,799

Reported Transaction(s) or (Instr. 3 and 4) Price (D)

0

\$3

D

Form: Direct (D) or Indirect (I)

Indirect Beneficial Ownership (Instr. 4)

7. Nature of

(Instr. 4)

I Group (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: Continental Insurance, Inc. - Form 4

9. Nu Deriv Secur Bene Own

Follo Repo Trans (Instr

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	ınt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)
	Derivative				Securities	S		(Instr.	3 and 4)	
	Security				Acquired					
	·				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Expiration		or	
						Exercisable	•	Title	Number	
						2			of	
				Code V	(A) (D)				Shares	

# **Reporting Owners**

Reporting Owner Name / Address		Relationships					
		10% Owner	Officer	Other			
Continental Insurance Group, Ltd. 450 PARK AVENUE, 30TH FLOOR NEW YORK, NY 10022		X					
HC2 Holdings 2, Inc. 450 PARK AVENUE, 30TH FLOOR NEW YORK, NY 10022		X					
HC2 HOLDINGS, INC. 450 PARK AVENUE, 30TH FLOOR NEW YORK, NY 10022		X					
CONTINENTAL GENERAL INSURANCE CO 11001 LAKELINE BLVD, SUITE 120 AUSTIN, TX 78717		X		Member of 10% Owner Group			
Continental Insurance, Inc. 11001 LAKELINE BLVD SUITE 120 AUSTIN, TX 788717		X					
Signatures							

## **Signatures**

Continental Insurance Group Ltd. by /s/ James P. Corcoran, President & CEO	12/27/2018	
**Signature of Reporting Person	Date	
HC2 Holdings 2, Inc. By /s/ Joseph A. Ferraro, Secretary	12/27/2018	
**Signature of Reporting Person	Date	
HC2 Holdings, Inc. By /s/ Joseph A. Ferraro, Chief Legal Officer	12/27/2018	
**Signature of Reporting Person	Date	
Continental General Insurance Company By /s/ James P. Corcoran, Executive Chair	12/27/2018	
**Signature of Reporting Person	Date	

Reporting Owners 2

Continental LTC Inc. By /s/ James P. Corcoran, President and CEO

12/27/2018

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

- \* 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).
- (1) Following the transactions reported herein, none of the Reporting Persons owns any shares of Common Stock of the Issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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