FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-010 | | | | | | | |
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| 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* SMITH STEPHEN M | | | 2. Date of Event Requiring Staten (Month/Day/Year 08/21/2017 | nent | 3. Issuer Name and Ticker or Trading Symbol INSEEGO CORP. [INSG] | | | | | | | |
|--|---|--|---|--|---|---|------------------------------------|------|---|---|--------------------------|--|
| (Last) 9605 SCRAN | (Last) (First) (Middle) 9605 SCRANTON ROAD, SUITE 300 | | | | Relationship of Reporting Pers (Check all applicable) Director | | on(s) to Issue | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | |
| (Street) | | | | | X | Officer (give title below) Chief Financial (| Other (spe below) Officer | cify | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | |
| SAN DIEGO | | 92121 | | | | | | | | Form filed by Reporting Po | y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | | int of Securities ially Owned (Instr. 4) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | d 3. Title and Amount of Secur Underlying Derivative Securi | | | 4. Convers | cise | 5. Ownership Form: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | Date Exercisable | Expiratio Date | n Title | 3 | Amount or Number of Shares | Price of Derivative Security | | Direct (D) or Indirect (I) (Instr. 5) | | | |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Stephen Smith 08/23/2017

** Signature of Reporting Person Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).