(Last)

(First)

115 EAST PUTNAM AVENUE

(Middle)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

this box if no longer subject to	
n 16. Form 4 or Form 5	
tions may continue. See	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden er response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

Footnote⁽⁴⁾

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Section obligati	this box if no long the second of the second		STA		ed purs	suant to	o Sectio	on 16(a	a) of the	Secur	NEFICI rities Exchan ompany Act	ige Act	of 193		HIP			ımber: ed average bu er response:	3235-028 rden 0
1. Name and Address of Reporting Person* Miller Brian					2. Issuer Name and Ticker or Trading Symbol INSEEGO CORP. [INSG]								(Che	5. Relationship of R (Check all applicable X Director			Reporting Person(s) to Issuer le) X 10% Owner		
(Last) (First) (Middle) 115 EAST PUTNAM AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/14/2019								Officer (give title below)				Other (specify below)	
(Street) GREENWICH CT 06830			- 4. I -	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	Forn	n filed b	Group Filing (Check Applicable by One Reporting Person by More than One Reporting				
(City)	(S	tate)	(Zip)																
1. Title of S	Security (Ins		le I - N	2. Transac Date (Month/Da	ction	2A. Exe	Deeme	d Date,	3. Transa Code (action	4. Securitie Disposed C	s Acqui	red (A)	or -	5. Amo Securit Benefic	unt of ies cially Followi	Fo (D	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) (D)	(A) or Price		Transaction/				(111511.4)	
Common	Stock			02/14/	2019	_			A		17,562(1)	(2)	A	\$0.00	60	0,083	\perp	D ⁽³⁾	
Common	Stock														9,24	46,570		I	See Footnote
		Т	able II -								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) ce of rivative	Executi if any			action (Instr.			6. Date Exerc Expiration Da (Month/Day/\)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of erivative ecurity estr. 5)	deriva Securi Benefi Owned Follow Repor	lowing ported .nsaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefici Ownersh (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amo or Num of Shar	ber					
1. Name ar Miller		Reporting Person	*						,		,		•	'		•		,	,
(Last) 115 EAS	T PUTNAI	(First) M AVENUE	(Mi	ddle)															
(Street)	WICH	СТ	06	830															
(City)		(State)	(Zij	0)															
		Reporting Person'																	
(Last) 115 EAS	T PUTNAI	(First) M AVENUE	(Mi	ddle)															
(Street)	WICH	СТ	06	830															
(City)		(State)	(Zi _l	0)															
		Reporting Person [*]	r																

(Street) GREENWICH	СТ	06830
(City)	(State)	(Zip)

Explanation of Responses:

- 1. The restricted stock units will vest in full on the first anniversary of the grant date.
- 2. The restricted stock units convert into common stock on a one-for-one basis.
- 3. The shares are owned directly by Mr. Miller.
- 4. The shares are owned directly by North Sound Trading, LP, a Delaware partnership ("North Sound Trading"). Mr. Miller is the sole shareholder of North Sound Management, Inc., a Delaware corporation, which in turn is the general partner of North Sound Trading. Mr. Miller is a director of the Issuer.

/s/ Brian Miller, President of North Sound Management, Inc., acting as General Partner of North Sound Trading, LP

** Signature of Reporting Person

02/19/2019

02/19/2019

02/19/2019

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.