FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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* Mondor Dan (Last) (First) (Middle) 9710 SCRANTON ROAD, SUITE 200 | | | | | 2. Issuer Name and Ticker or Trading Symbol INSEEGO CORP. [INSG] 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2021 | | | | | | | | | ck all applic Directo Officer below) | cable) or (give title | Person(s) to Issuer 10% Owner Other (specification) a and CEO | | vner | |
|--|--|------------|----------------|----------------------------|--|---------------------------------|--|------------------|------------------|---|--------------------|-----------------|---|---|---|--|---|------|------------|
| (Street) SAN DII (City) | | | 92121 (Zip) | | 4. If | f Ame | endme | nt, Date | of Origina | l Filed | l (Month/Da | | 6. Ind Line) X | • | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execution Execution if any | | emed tion Date, n/Day/Yea | Transaction Dispos Code (Instr. 5) | | Disposed | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 5. Amou Securitie Beneficia Owned F | s ally following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | n: Direct r Indirect | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | :e | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) |
| Common Stock | | | | 02/10 | 0/2021 | | | | M ⁽¹⁾ | | 75,00 | 0 A | \$0.9 | | 231 | 231,488 | | D | |
| Common Stock 0. | | | | 02/10 | 0/2021 | | | | S ⁽¹⁾ | | 75,00 | 0 D | \$2 | 0.67 | 156,488 | | | D | |
| Common Stock 02/1 | | | | 02/11 | L/ 202 1 | /2021 | | M ⁽¹⁾ | | 75,00 | 0 A | \$(|).94 | 231,488 | | | D | | |
| Common Stock 02/11/ | | | | /2021 | | S ⁽¹⁾ | | 75,00 | 75,000 D | | 9.02 | 2 156,488 | | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| | | | | Transad Code (I | ransaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | | Beneficial Ownership t (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amou or Numb of Share | er | | | | | |
| Stock Option (Right to Buy) | \$0.94 | 02/10/2021 | | | М | | | 75,000 | 06/06/20 | 18 | 06/06/2027 | Common Stock | 75,0 | 00 | \$0 | 675,00 | 0 | D | |
| Stock Option (Right to Buy) | \$0.94 | 02/11/2021 | | | М | | | 75,000 | 06/06/20 | 18 | 06/06/2027 | Common Stock | 75,0 | 00 | \$0 | 600,00 | 0 | D | |

Explanation of Responses:

1. Automatic option exercise and same day sale pursuant to 10b5-1 trading plan adopted by the Reporting Person on December 10, 2020.

Remarks:

/s/ Kurt E. Scheuerman, 02/12/2021 Attorney-in-Fact

** Signature of Reporting Person Date

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

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 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).