Edgar Filing: INSWEB CORP - Form 4

| INSWEB CO Form 4 | DRP | | | | | | | | | | |
|--|---|---|---------------------------------|--------------|---------------------------------------|---|---------------------------------|--|--|---|--|
| September 1 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | APPROVAL 3235-0287 | | |
| Check this box | | | | | | | | Expires: | January 31 | | |
| if no long subject to Section 1 Form 4 o Form 5 obligation | Section 10 | CHANGES IN BENEFICIAL OWN SECURITIES ection 16(a) of the Securities Exchange bublic Utility Holding Company Act of | | | | | Estimated a burden hou response | ours per | | | |
| may cont <i>See</i> Instru 1(b). | inue. | · | | vestment | U | · · | | | | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| 1. Name and A ELSAWAF | 2. Issuer Name and Ticker or Trading Symbol INSWEB CORP [INSW] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| (Last) | (First) (M | liddle) | 3. Date of Earliest Transaction | | | | | (Check all applicable) | | | |
| 11290 PYRITES WAY, SUITE 200 | | | (Month/Day/Year) 09/11/2006 | | | | | Director Officer (give title Other (specify below) Dther (specify below) | | | |
| | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| GOLD RIV | ER, CA 95762 | | | | | | | Form filed by M Person | Iore than One Ro | eporting | |
| (City) | (State) (| Zip) | Table | e I - Non-Do | erivative S | Securi | ities Acc | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | any | | | | , , , , , , , , , , , , , , , , , , , | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 09/11/2006 | | | Р | 200 | А | \$ 1.9 | 515,430 | D | | |
| Common Stock | 09/11/2006 | | | Р | 100 | А | \$ 1.65 | 515,530 | D | | |
| Common Stock | 09/11/2006 | | | Р | 3,890 | А | \$ 1.82 | 519,420 | D | | |

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

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 control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-----------------------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships ess | | | | | | | |
|--|----------------------|------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| ELSAWAF HASSAN F 11290 PYRITES WAY SUITE 200 GOLD RIVER, CA 95762 | | Х | | | | | | |
| Signatures | | | | | | | | |
| L. Eric Loewe, Attorney in Fac Elsawaf | san | 09/13/2006 | | | | | | |
| **Signature of Reporting P | 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).

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.