GAGNON NEIL Form 4 July 12, 2018

## FORM 4

#### OMB APPROVAL

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires:

2005

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

Expires: 2005
Estimated average burden hours per

Form 4 or Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

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1(b).

(City)

(Zip)

(State)

(Print or Type Responses)

1. Name and Address of Reporting Person * GAGNON NEIL	2. Issuer Name and Ticker or Trading Symbol General Finance CORP [GFN]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First) (Middle)  1370 AVENUE OF THE  AMERICAS, 24TH FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 07/10/2018	Director X 10% Owner Officer (give title below) Other (specify below)		
(Street)  NEW YORK, NY 10019	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 Form filed by More than One Reporting Person		

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)	4. Securities Acquired (A) ionor Disposed of (D) (Instr. 3, 4 and 5)  (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount (D) Price	(Instr. 3 and 4)		Ву
Common	05/10/2010			51.004 5 \$	1 100 111		Managing Member as General

Common Stock	07/10/2018	S	51,224	D	\$ 14.0386	1,136,441	I	Managing Member as General Partner of Gagnon Investment Associates
Common Stock	07/11/2018	S	4,127	D	\$ 14.0006	1,132,314	I	By Managing Member as General

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								Partner of Gagnon Investment Associates
Common Stock	07/10/2018	S	4,638	D	\$ 14.0368	128,852	I	By Managing Member as General Partner of Darwin Partnership
Common Stock	07/11/2018	S	373	D	\$ 14.0006	128,479	I	By Managing Member as General Partner of Darwin Partnership
Common Stock	07/11/2018	S	27,041	D	\$ 140.241	166,501	I	By Limited Partner of the Family Partnership
Common Stock						691,795	D	
Common Stock						21,810	I	By self as Trustee of Gagnon Securities LLC Profit Sharing Plan

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

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Amount of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e	Securities	(Instr. 5)
	Derivative				Securities	3	(Instr. 3 and 4)	
	Security				Acquired			
					(A) or			
					Disposed			

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of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Expiration Title Amount Exercisable Date or

Number of Shares

## **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

GAGNON NEIL 1370 AVENUE OF THE AMERICAS 24TH FLOOR NEW YORK, NY 10019

X

## **Signatures**

/s/ Neil Gagnon 07/12/2018

\*\*Signature of Date
Reporting Person

## **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.

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