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

# SCHEDULE 13G

(Rule 13d-102)

# INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2(b)

(Amendment No. 1)<sup>1</sup>

| Mallinckrodt plc  |
|---|
| (Name of Issuer)  |
| Ordinary Shares, par value \$0.01 per share   |
| (Title of Class of Securities)  |
| G5890A102   |
| (CUSIP Number)  |
| December 31, 2023   |
| (Date of Event Which Requires Filing of this Statement)   |
|   |
| Check the appropriate box to designate the rule pursuant to which this Schedule is filed:   |
| □ Rule 13d-1(b)   |
| ⊠ Rule 13d-1(c)   |
| □ Rule 13d-1(d)   |
|   |
|   |
|   |
| The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in prior cover page.  |
| The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, <i>see</i> the <i>Notes</i> ). |

| 1                   | NAME OF REPOR  | TING PERSON  |       |
|---------------------|----------------|--|-------|
|                     | Percy Rockda   | ale LLC  |       |
| 2                   |                | ROPRIATE BOX IF A MEMBER OF A GROUP                    | (a) 🗆 |
|                     |                |  | (b) □ |
| 3                   | SEC USE ONLY   |  |       |
|                     |                |  |       |
| 4                   | CITIZENSHIP OR | PLACE OF ORGANIZATION                                  |       |
|                     | Michigan       |  |       |
| NUMBER OF<br>SHARES | 5              | SOLE VOTING POWER                                      |       |
| BENEFICIALLY        |                | 0  |       |
| OWNED BY<br>EACH    | 6              | SHARED VOTING POWER                                    |       |
| REPORTING           |                | 0  |       |
| PERSON WITH         | 7              | SOLE DISPOSITIVE POWER                                 |       |
|                     |                | 0  |       |
|                     | 8              | SHARED DISPOSITIVE POWER                               |       |
|                     |                | 0  |       |
| 9                   | AGGREGATE AM   | OUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |       |
|                     | 0              |  |       |
| 10                  | CHECK BOX IF T | HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES |       |
|                     |                |  |       |
| 11                  | PERCENT OF CLA | ASS REPRESENTED BY AMOUNT IN ROW (9)                   |       |
|                     | 0%             |  |       |
| 12                  | TYPE OF REPORT | TING PERSON  |       |
|                     | 00             |  |       |

# CUSIP No. G5890A102

|              | <del> </del>  |   |       |
|--------------|---|---|-------|
| 1            | NAME OF REPORTING PERSON                                    |   |       |
|              |   |   |       |
|              |   | General Insurance Company                               |       |
| 2            | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) $\Box$ |   |       |
|              |   |   | (b) □ |
|              |   |   |       |
| 3            | SEC USE ONLY  |   |       |
|              |   |   |       |
|              |   |   |       |
| 4            | CITIZENSHIP OR PLACE OF ORGANIZATION                        |   |       |
|              |   |   |       |
|              | Texas   |   |       |
| NUMBER OF    | 5   | SOLE VOTING POWER                                       |       |
| SHARES       |   |   |       |
| BENEFICIALLY |   | 0   |       |
| OWNED BY     | 6   | SHARED VOTING POWER                                     |       |
| EACH         |   |   |       |
| REPORTING    |   | 0   |       |
| PERSON WITH  | 7   | SOLE DISPOSITIVE POWER                                  |       |
|              |   |   |       |
|              |   | 0   |       |
|              | 8   | SHARED DISPOSITIVE POWER                                |       |
|              |   |   |       |
|              |   | 0   |       |
| 9            | AGGREGATE AN  | MOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |       |
|              |   |   |       |
|              | 0   |   |       |
| 10           | CHECK BOX IF  | THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES |       |
|              |   | • •   |       |
|              |   |   |       |
| 11           | PERCENT OF CL   | ASS REPRESENTED BY AMOUNT IN ROW (9)                    |       |
|              |   | .,  |       |
|              | 0%  |   |       |
| 12           | TYPE OF REPOR   | TING PERSON   |       |
|              |   |   |       |
|              | CO  |   |       |

| 1            | NAME OF REPORTING PERSON                                    |  |       |
|--------------|---|--|-------|
|              |   |  |       |
|              |   | nsurance Group, Ltd.                                   |       |
| 2            | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) $\Box$ |  |       |
|              |   |  | (b) □ |
|              |   |  |       |
| 3            | SEC USE ONLY  |  |       |
|              |   |  |       |
|              |   |  |       |
| 4            | CITIZENSHIP OR PLACE OF ORGANIZATION                        |  |       |
|              |   |  |       |
|              | Delaware  |  |       |
| NUMBER OF    | 5   | SOLE VOTING POWER                                      |       |
| SHARES       |   |  |       |
| BENEFICIALLY |   | 0  |       |
| OWNED BY     | 6   | SHARED VOTING POWER                                    |       |
| EACH         |   |  |       |
| REPORTING    |   | 0  |       |
| PERSON WITH  | 7   | SOLE DISPOSITIVE POWER                                 |       |
|              |   |  |       |
|              |   | 0  |       |
|              | 8   | SHARED DISPOSITIVE POWER                               |       |
|              |   |  |       |
|              |   | 0  |       |
| 9            | AGGREGATE AM  | OUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |       |
|              |   |  |       |
|              | 0   |  |       |
| 10           | CHECK BOX IF T  | HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES |       |
|              |   |  |       |
|              |   |  |       |
| 11           | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)           |  |       |
|              |   |  |       |
|              | 0%  |  |       |
| 12           | TYPE OF REPORT  | TING PERSON  |       |
|              |   |  |       |
|              | CO  |  |       |
| L            |   |  |       |

| 1                      | NAME OF DEDOD   | FINIC DED SON  |                |
|------------------------|---|--|----------------|
| 1                      | NAME OF REPORTING PERSON  |  |                |
|                        | Continental G   | eneral Holdings LLC                                    |                |
| 2                      | Continental General Holdings LLC  CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (a) □ |  |                |
| 2                      |   |  | (a) □<br>(b) □ |
|                        |   |  | (0) 🗆          |
| 3                      | SEC USE ONLY  |  |                |
|                        |   |  |                |
|                        |   |  |                |
| 4                      | CITIZENSHIP OR PLACE OF ORGANIZATION  |  |                |
|                        |   |  |                |
|                        | Michigan  |  |                |
| NUMBER OF              | 5   | SOLE VOTING POWER                                      |                |
| SHARES<br>BENEFICIALLY |   | 0  |                |
| OWNED BY               | 6   | SHARED VOTING POWER                                    |                |
| EACH                   | 0   | SHARED VOTING FOWER                                    |                |
| REPORTING              |   | 0  |                |
| PERSON WITH            | 7   | SOLE DISPOSITIVE POWER                                 |                |
|                        | ,   |  |                |
|                        |   | 0  |                |
|                        | 8   | SHARED DISPOSITIVE POWER                               |                |
|                        |   |  |                |
|                        |   | 0  |                |
| 9                      | AGGREGATE AMO   | OUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |                |
|                        | 0   |  |                |
| 10                     |   | HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES | П              |
| 10                     | CHECK BOX II 11   | il AGGREGATE AMOUNT IN ROW (7) EXCEODES CERTAIN SHARES |                |
|                        |   |  |                |
| 11                     | PERCENT OF CLA  | SS REPRESENTED BY AMOUNT IN ROW (9)                    |                |
|                        |   |  |                |
|                        | 0%  |  |                |
| 12                     | TYPE OF REPORT  | ING PERSON   |                |
|                        |   |  |                |
|                        | 00  |  |                |

| 1                   | NAME OF REPOR   | TING PERSON  |                |
|---------------------|-----------------|--|----------------|
|                     | Michael Gorz    | zynski   |                |
| 2                   |                 | ROPRIATE BOX IF A MEMBER OF A GROUP                    | (a) □<br>(b) □ |
|                     |                 |  | (0) 🗆          |
| 3                   | SEC USE ONLY    |  |                |
|                     |                 |  |                |
| 4                   | CITIZENSHIP OR  | PLACE OF ORGANIZATION                                  |                |
|                     | United States   |  |                |
| NUMBER OF<br>SHARES | 5               | SOLE VOTING POWER                                      |                |
| BENEFICIALLY        |                 | 0  |                |
| OWNED BY<br>EACH    | 6               | SHARED VOTING POWER                                    |                |
| REPORTING           |                 | 0  |                |
| PERSON WITH         | 7               | SOLE DISPOSITIVE POWER                                 |                |
|                     |                 | 0  |                |
|                     | 8               | SHARED DISPOSITIVE POWER                               |                |
|                     |                 | 0  |                |
| 9                   | AGGREGATE AM    | OUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |                |
|                     | 0               |  |                |
| 10                  | CHECK BOX IF T  | HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES |                |
| 11                  | DED GENTE OF GI | A COLDED DE CALVERDO DE LA MOLDITA DE DOUGO            |                |
| 11                  | PERCENT OF CLA  | ASS REPRESENTED BY AMOUNT IN ROW (9)                   |                |
| 12                  | 0%              |  |                |
| 12                  | TYPE OF REPORT  | ING PERSON   |                |
|                     | IN              |  |                |

# CUSIP No. G5890A102

# Item 1(a). Name of Issuer:

Mallinckrodt plc, an Irish corporation (the "Issuer").

#### Item 1(b). Address of Issuer's Principal Executive Offices:

College Business & Technology Park, Cruiserath, Blanchardstown, Dublin 15, Ireland

## Item 2(a). Name of Person Filing

The names of the persons filing this statement on Schedule 13G (collectively, the "Reporting Persons") are:

- · Percy Rockdale LLC ("Percy Rockdale"),
- · Continental General Insurance Company ("CGIC"),
- · Continental Insurance Group, Ltd. ("CIG"),
- · Continental General Holdings LLC ("CGH"), and
- · Michael Gorzynski ("Mr. Gorzynski").

## Item 2(b). Address of Principal Business Office or, if None, Residence

The address of the principal office for Percy Rockdale and Mr. Gorzynski is 595 Madison Avenue, 30<sup>th</sup> Floor, New York, NY 10022. The principal business address for each of CGIC, CIG and CGH is 11001 Lakeline Blvd., Ste. 120, Austin, TX 78717.

# Item 2(c). Citizenship

Each of Percy Rockdale and CGH is a Michigan limited liability company. CIG is a Delaware corporation. CGIC is a Texas domiciled life and health insurance company. Mr. Gorzynski is a citizen of the United States of America and Poland.

# Item 2(d). Title of Class of Securities:

Ordinary Shares, par value \$0.01 per share (the "Shares").

# Item 2(e). CUSIP Number:

G5890A102

# Item 3. If This Statement is Filed Pursuant to Rule 13d-1(b), or 13d-2(b) or (c), Check Whether the Person Filing is a:

|     | /x/ | Not applicable.  |
|-----|-----|--|
| (a) | //  | Broker or dealer registered under Section 15 of the Exchange Act.  |
| (b) | //  | Bank as defined in Section 3(a)(6) of the Exchange Act.  |
| (c) | //  | Insurance company as defined in Section 3(a)(19) of the Exchange Act.  |
| (d) | //  | Investment company registered under Section 8 of the Investment Company Act.   |
| (e) | //  | An investment adviser in accordance with Rule 13d-1(b)(1)(ii)(E).  |
| (f) | //  | An employee benefit plan or endowment fund in accordance with Rule 13d-1(b)(1)(ii)(F).   |
| (g) | //  | A parent holding company or control person in accordance with Rule 13d-1(b)(1)(ii)(G).   |
| (h) | //  | A savings association as defined in Section 3(b) of the Federal Deposit Insurance Act.   |
| (i) | //  | A church plan that is excluded from the definition of an investment company under Section 3(c)(14) of the Investment Company Act.  |
| (j) | //  | A non-U.S. institution, in accordance with Rule 13d-1(b)(1)(ii)(J).  |
| (k) | //  | Group, in accordance with Rule 13d-1(b)(1)(ii)(K). If filing as a non-U.S. institution in accordance with Rule 13d-1(b)(1)(ii)(J), please specify the type of institution: |
|     |     |  |

# Item 4. Ownership

(a) Amount beneficially owned:

As of December 31, 2023, no Reporting Person beneficially owned any Shares.

(b) Percent of class:

As of December 31, 2023, the Reporting Persons beneficially owned 0% of the outstanding Shares.

- (c) Number of shares as to which such person has:
  - (i) Sole power to vote or to direct the vote

See Cover Pages Items 5-9.

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(ii) Shared power to vote or to direct the vote

See Cover Pages Items 5-9.

(iii) Sole power to dispose or to direct the disposition of

See Cover Pages Items 5-9.

(iv) Shared power to dispose or to direct the disposition of

See Cover Pages Items 5-9.

## Item 5. Ownership of Five Percent or Less of a Class.

If this statement is being filed to report the fact that as of the date hereof the Report Persons have ceased to be the beneficial owners of more than 5 percent of the class of securities, check the following box [X].

#### Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not Applicable.

# Item 7. Identification and Classification of the Subsidiary That Acquired the Security Being Reported on by the Parent Holding Company or Control Person.

Not Applicable.

## Item 8. Identification and Classification of Members of the Group.

See Exhibit 99.1 to the Schedule 13G filed by the Reporting Persons with the Securities and Exchange Commission on May 30, 2023.

#### Item 9. Notice of Dissolution of Group.

Not Applicable.

#### Item 10. Certifications.

By signing below each of the undersigned certifies that, to the best of its knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

# **SIGNATURE**

After reasonable inquiry and to the best of his knowledge and belief, the undersigned certifies that the information set forth in this statement is true, complete and correct.

Date: February 14, 2024

Percy Rockdale LLC

By: /s/ Michael Gorzynski

Name: Michael Gorzynski Title: Sole Manager

Continental General Insurance Company

By: /s/ Michael Gorzynski

Name: Michael Gorzynski Title: Executive Chairman

Continental Insurance Group, Ltd.

By: /s/ Michael Gorzynski

Name: Michael Gorzynski Title: Chairman & President

Continental General Holdings LLC

By: /s/ Michael Gorzynski

Name: Michael Gorzynski

Title: Manager

/s/ Michael Gorzynski

Michael Gorzynski