FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

۷	Vas	hing	ton,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	iuc. Sec		Filed							es Exchang npany Act o		1934		hours	s per n	esponse:	0.5
1. Name and Address of Reporting Person* <u>Kapur Ajay</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Edgio, Inc. [ EGIO ]						5 (0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last)	(Last) (First) (Middle) C/O EDGIO, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024									Officer (give title below)		Other (spec below)	
11811 N. TATUM BLVD., SUITE 3031					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) PHOENIX AZ 85028													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication													
			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - Non	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially Ow	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed C Code (Instr. 5)		ies Acquired (A) Of (D) (Instr. 3, 4		and Secu Bene Owne	ficially ed Following	Fori	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) c	Price	Trans	ported insaction(s) str. 3 and 4)			(Instr. 4)			
Common	Stock			03/01/	2024				F <sup>(1)</sup>		1,535	D	\$9.	86 149	9,808(2)(3)	<sup>2)(3)</sup> D		
		Tal									osed of, convertib				ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		Transaction Code (Instr. 8)  Sec (A) Dis of (I(Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	6. Date Exercisable Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code		(A) (D)		Date Exercisa	able	Expiration Date		Amount or Number of Shares					

## **Explanation of Responses:**

- 1. The forfeiture reported in this row represents restricted stock units that were withheld by the Company solely for the purpose of satisfying tax obligations arising upon the automatic vesting of 3,762 restricted stock units.
- 2. This includes 77.651 unvested restricted stock units
- 3. The shares shown have been adjusted to reflect the Issuer's reverse stock split of its outstanding shares of common stock on a 1-for-40 basis that occurred on March 1, 2024.

## Remarks:

Executed pursuant to the Limited Power of Attorney for Section 16 reporting obligations dated September 14, 2021.

Ajay Kapur /s/ Richard Diegnan, Attorney-in-Fact

03/05/2024

\*\* Signature of Reporting Person Date

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.