FORM 4

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

Washington,	D.C.	20549	

<b>STATEMENT OF</b>	<b>CHANGES IN</b>	<b>BENEFICIAL</b>	<b>OWNERSHIP</b>

OIVID 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

Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Edgio, Inc. [ EGIO ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
<u>Lyons</u> I	<u>Lyons Bob</u> <u>Edglo, mc.</u> [ EGlo ]									X	Direct	tor	10	% Ow	ner				
(Last)	(Fir	rst) (N	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/01/2023							X	Office below	,	be	her (s <sub>l</sub> low)	pecify	
C/O EDO	GIO, INC.				12,0	1,202	_									C	EO		
11811 N. TATUM BLVD., SUITE 3031					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)					1									X	Form	filed by On	e Reporting	Perso	n
PHOENI	X AZ	2 8	5028												Form Perso		re than One	Repo	rting
(City)	(St	ate) (Z	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.									ded to					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	Benef	ficially	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,				s Acquired (A) or Of (D) (Instr. 3, 4 and		Securities Beneficially Owned Following		6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	ct C	7. Nature of Indirect Beneficial Ownership Instr. 4)					
								Code	v	Amount	(A) (D)	or P	rice	Transa	ported ansaction(s) str. 3 and 4)				
Common	Stock			12/01/2	2023		F <sup>(1)</sup>		20,301	D	) (	\$0.48	.48 1,569,698(2)		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., pu	ns, c	1115, V	varra	ınıs,	optioi	115, 0	onvertib	ie sec	curit	ies)					
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, if any		ion Date,	4. Transa Code ( 8)			Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code				Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	ber					

## **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 83,365 restricted stock units.
- 2. This includes 243,216 unvested restricted stock units.

## Remarks:

Executed pursuant to the Limited Power of Attorney for Section 16 reporting obligations dated August 26, 2022.

Bob Lyons /s/ Richard Diegnan, Attorney-In-Fact

12/05/2023

\*\* 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.