FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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hours per response	: 0.5							

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

Name and Address of Reporting Person* Hadden Patricia						2. Issuer Name and Ticker or Trading Symbol Limelight Networks, Inc. [LLNW]									ck all app	ationship of Reporting all applicable) Director		10% O	vner
		NETWORKS, IN		TE 400		3. Date of Earliest Transaction (Month/Day/Year) 06/03/2020									Office below	er (give title v)	Other (sp below)		specify
1465 NORTH SCOTTSDALE ROAD, SUITE 400 (Street) SCOTTSDALE AZ 85257						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	Form	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St		Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)						Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				5. Amo Securit Benefic Owned Reporte	ies cially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	Amount	(A) (D)	or F	rice	Transa	action(s) . 3 and 4)			(111341. 4)				
Common Stock 06/03/2						2020					10,053) :	\$5.01	73,	,251 ⁽²⁾		D	
Common Stock 06/04/2				2020				A ⁽³⁾		27,162	A		\$ <mark>0</mark> (4)	100	0,413 ⁽⁵⁾		D		
	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)	erivative Conversion Date Execution (Month/Day/Year) if any				4. Transa Code (8)		of		6. Date Exerci Expiration Da (Month/Day/Yo		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or I (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Num 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 45,692 restricted stock units.
- 2. This includes 21,124 unvested restricted stock units.
- 3. The Reporting Person received an aggregate of 27,162 restricted stock units, which, if eligible, shall become fully vested and exercisable on the day prior to the Issuer's 2021 annual shareholder meeting (but in no event later than December 31, 2021), subject to Reporting Person's continued services to the Issuer through such date. Each restricted stock unit represents a contingent right to receive one (1) share of the Issuer's Common Stock.
- 4. \$0.00 is used for technical reasons as there is no price for this security until it vests in the case of RSUs, or until it is exercised in the case of stock options.
- 5. This includes 48,286 unvested restricted stock units.

Executed pursuant to the Limited Power of Attorney for Section 16 reporting obligations dated November 7, 2018.

Patricia Hadden /s/ James R. Todd, Attorney-in Fact

06/05/2020

** 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.