FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
,	OMB Number:	3235-0287							
	Estimated average burden								

0.5

hours per response:

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

								01 1110 11	IVCStillCil		.,,										
Name and Address of Reporting Person*  Cile						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Limelight Networks, Inc. [ LLNW ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Silverman Kurt					1	Emergia recworks, me. [ DERW ]										Direc	ctor		10% O	wner	
														_	X		er (give title			(specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)											elow) below)				
C/O LIMELIGHT NETWORKS, INC.					07/	07/20/2018									Senior Vice President-Dev.						
222 SOUTH MILL AVENUE, 8TH FLOOR																					
222 SOUTH MILL AVENUE, 8TH FLOOR				4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Ctroot)					"	II Amendment, Date of Original Filed (World // Day/ Teal)										Line)					
(Street) TEMPE AZ 85281															X Form filed by One Reporting Person						
															Form filed by More than One Re					orting	
,																Pers	on				
(City)	(St	ate) (	Zip)																		
		Tabl	e I - Nor	-Deriv	ative	Se	curitie	s Acc	uired,	Dis	osed o	f, or	Bene	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				n/Day/Year)   E		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,			4 and Sec Ben Owr		curities neficially vned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
										v	Amount		(A) or (D)	Price	.	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 07/20					07/20/2018						7,500	0 D		\$	5	698,801 <sup>(2)</sup>			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			(	e.g., pı	uts, c	alls	, warr	ants,	option	s, co	onvertib	le se	ecurit	ies)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	F D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	or Nun of	ount nber res							

## Explanation of Responses:

- 1. Shares sold pursuant to 10b5-1 plan adopted on December 1, 2017.
- 2. This includes 163,687 unvested restricted stock units.

## Remarks:

 $Executed \ pursuant \ to \ the \ Limited \ Power \ of \ Attorney \ for \ Section \ 16 \ reporting \ obligations \ dated \ November \ 7, \ 2013.$ 

Kurt Silverman /s/ James R.

Todd, Attorney-in-Fact

07/24/2018

\*\* 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.