The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

OMB APPROVAL
OMB 3235Number: 0076

Estimated average

burden

hours per response:

4.00

1. Issuer's Identity

CIK (Filer ID Number)

Previous
Names

X None

Entity Type

<u>0001391127</u> X Corporation

Name of Issuer Limited Partnership

Limelight Networks, Inc.

Limited Liability Company

Jurisdiction of
Incorporation/OrganizationGeneral PartnershipDELAWAREBusiness TrustOther (Specify)

Year of Incorporation/Organization

X Over Five Years Ago

Within Last Five Years (Specify Year)

Yet to Be Formed

2. Principal Place of Business and Contact Information

Name of Issuer

Limelight Networks, Inc.

Street Address 1 Street Address 2

1465 NORTH SCOTTSDALE ROAD, STE 500

City State/Province/Country ZIP/PostalCode Phone Number of Issuer

SCOTTSDALE ARIZONA 85257 602-850-5000

3. Related Persons

Last Name First Name Middle Name

LYONS ROBERT A

Street Address 1 Street Address 2

1465 NORTH SCOTTSDALE

ROAD, STE 500

City State/Province/Country ZIP/PostalCode

SCOTTSDALE ARIZONA 85257

Relationship: X Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

AMARAL WALTER D

Street Address 1 Street Address 2

1465 NORTH SCOTTSDALE

ROAD, STE 500

City State/Province/Country ZIP/PostalCode

SCOTTSDALE ARIZONA 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

BEWSHER

DOUG

Street Address 1

Street Address 2

1465 NORTH SCOTTSDALE

ROAD, STE 500

City State/Province/Country ZIP/PostalCode

SCOTTSDALE ARIZONA 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Middle Name Last Name First Name

DEBEVOISE MARC

> **Street Address 1 Street Address 2**

1465 NORTH SCOTTSDALE

ROAD, STE 500

State/Province/Country ZIP/PostalCode City

SCOTTSDALE ARIZONA 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

JEFFREY Τ **FISHER**

> Street Address 1 Street Address 2

1465 NORTH SCOTTSDALE

ROAD, STE 500

City **State/Province/Country** ZIP/PostalCode

SCOTTSDALE ARIZONA 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

GENEREUX SCOTT A

> **Street Address 2 Street Address 1**

1465 NORTH SCOTTSDALE

ROAD, STE 500

ZIP/PostalCode City **State/Province/Country**

ARIZONA SCOTTSDALE 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

HADDEN PATRICIA PARRA

Street Address 1 Street Address 2

1465 NORTH SCOTTSDALE

ROAD, STE 500

City State/Province/Country ZIP/PostalCode

SCOTTSDALE ARIZONA 85257

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Middle Name **Last Name First Name DAVID** C **PETERSCHMIDT** Street Address 2 **Street Address 1** 1465 NORTH SCOTTSDALE ROAD, STE 500 **State/Province/Country** ZIP/PostalCode City **SCOTTSDALE ARIZONA** 85257 **Relationship:** Executive Officer X Director Promoter Clarification of Response (if Necessary): NON-EXECUTIVE CHAIRMAN OF THE BOARD AND DIRECTOR **Last Name First Name** Middle Name **ARMSTRONG ERIC Street Address 2 Street Address 1** 1465 NORTH SCOTTSDALE ROAD, STE 500 ZIP/PostalCode City State/Province/Country **SCOTTSDALE ARIZONA** 85257 **Relationship:** X Executive Officer Director Promoter Clarification of Response (if Necessary): SENIOR VICE PRESIDENT OF GROWTH **First Name Middle Name Last Name BONCEL DANIEL** R **Street Address 1 Street Address 2** 1465 NORTH SCOTTSDALE ROAD, STE 500 City **State/Province/Country** ZIP/PostalCode **SCOTTSDALE ARIZONA** 85257 **Relationship:** X Executive Officer Director Promoter Clarification of Response (if Necessary): CHIEF FINANCIAL OFFICER **Last Name First Name** Middle Name **CROSS CHRISTINE Street Address 1** Street Address 2 1465 NORTH SCOTTSDALE ROAD, STE 500 **State/Province/Country** ZIP/PostalCode City ARIZONA **SCOTTSDALE** 85257 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): SENIOR VICE PRESIDENT, CHIEF MARKETING OFFICER Middle Name **Last Name First Name DISANTO MICHAEL** D **Street Address 2 Street Address 1** 1465 NORTH SCOTTSDALE ROAD, STE 500 City State/Province/Country ZIP/PostalCode **SCOTTSDALE ARIZONA** 85257 **Relationship:** X Executive Officer Director Promoter

CHIEF ADMINISTRATIVE AND LEGAL OFFICER AND SECRETARY

4. Industry Group

Agriculture Health Care Retailing
Banking & Financial Services Biotechnology Restaurants

Commercial Banking Health Insurance Technology
Insurance Hospitals & Physicians Computers

Investing
Investment Banking
Pharmaceuticals
Pooled Investment Fund
Other Health Care
X Other Technology

Is the issuer registered as Manufacturing Travel an investment company under Real Estate

an investment company under the Investment Company
Act of 1940?

Real Estate Airlines & Airports

Commercial Lodging & Conventions

Yes No Construction Tourism & Travel Services

Other Real Estate

Other Banking & Financial Services REITS & Finance Other Travel

Business Services Residential Other Energy

Coal Mining

5. Issuer Size

Electric Utilities

Oil & Gas

Other Energy

Not Applicable

Energy Conservation
Environmental Services

| Revenue Range | OR | Aggregate Net Asset Value Range |
|---------------------------------|----|---------------------------------|
| No Revenues | | No Aggregate Net Asset Value |
| \$1 - \$1,000,000 | | \$1 - \$5,000,000 |
| \$1,000,001 - \$5,000,000 | | \$5,000,001 - \$25,000,000 |
| \$5,000,001 - \$25,000,000 | | \$25,000,001 - \$50,000,000 |
| \$25,000,001 - \$100,000,000 | | \$50,000,001 - \$100,000,000 |
| Over \$100,000,000 | | Over \$100,000,000 |
| X Decline to Disclose | | Decline to Disclose |

Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

| | act Section 3(c) | |
|---|------------------|------------------|
| Rule 504(b)(1) (not (i), (ii) or (iii)) | Section 3(c)(1) | Section 3(c)(9) |
| Rule 504 (b)(1)(i) | Section 3(c)(2) | Section 3(c)(10) |
| Rule 504 (b)(1)(ii) | Section 3(c)(3) | Section 3(c)(11) |
| Rule 504 (b)(1)(iii) X Rule 506(b) | Section 3(c)(4) | Section 3(c)(12) |
| Rule 506(c) | Section 3(c)(5) | Section 3(c)(13) |
| Securities Act Section 4(a)(5) | Section 3(c)(6) | Section 3(c)(14) |
| | Section 3(c)(7) | |

7. Type of Filing

| Amendment Amendment | Sale Yet to Occur | | | |
|--|--|---|---------------------------|--------------------|
| 8. Duration of Offering | | | | |
| Does the Issuer intend this offering to last r | nore than one year? | Yes X No | | |
| 9. Type(s) of Securities Offered (select all the | nat apply) | | | |
| X Equity Debt Option, Warrant or Other Right to Acqui Security to be Acquired Upon Exercise of Other Right to Acquire Security | | Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe) | 3 | |
| 10. Business Combination Transaction | | | | |
| Is this offering being made in connection was a merger, acquisition or exchange offer? | ith a business combin | ation transaction, such X Yes 1 | No | |
| Clarification of Response (if Necessary): | | | | |
| Issuer issued shares of its common stock as | partial merger conside | eration for the Issuer's acquisition o | of Moov Cor | poration. |
| 11. Minimum Investment | | | | |
| Minimum investment accepted from any o | itside investor \$0 USI |) | | |
| 12. Sales Compensation | | | | |
| Recipient | Recip | ient CRD Number X None | | |
| (Associated) Broker or Dealer X None | (Asso Numb | ciated) Broker or Dealer CRD er | X None | |
| Street Address 1 | | Street Address 2 | | |
| City | State/I | Province/Country | | ZIP/Postal Code |
| State(s) of Solicitation (select all that apply Check "All States" or check individual States | | eign/non-US | | |
| 13. Offering and Sales Amounts | | | | |
| Total Offering Amount \$22,500,000 U | SD or Indefinite | | | |
| Total Amount Sold \$22,500,000 U | SD | | | |
| Total Remaining to be Sold \$0 U | SD or Indefinite | | | |
| Clarification of Response (if Necessary): | | | | |
| Shares will be issued upon receipt of Letter | s of Transmittal | | | |
| 14. Investors | | | | |
| Select if securities in the offering have be investors, and enter the number of such a Regardless of whether securities in the offering have be accredited investors, enter the total number of such a securities in the offering have be investors, and enter the total number of such as a securities in the offering have be investors, and enter the total number of such as a securities in the offering have be investors, and enter the number of such as a securities in the offering have be investors, and enter the number of such as a securities in the offering have be investors, and enter the number of such as a securities in the offering have be investors, and enter the number of such as a securities in the offering have be investors. | non-accredited investo ffering have been or n | ors who already have invested in the nay be sold to persons who do not o | e offering. qualify as | 40 |
| 15. Sales Commissions & Finder's Fees Exp | enses | | | |
| Provide separately the amounts of sales con known, provide an estimate and check the b | | | t of an expen | diture is not |

\$0 USD

Sales Commissions

Estimate

Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

| Issuer | Signature | Name of Signer | Title | Date |
|--------------------------|------------------|----------------|---------------------------------------|------------|
| Limelight Networks, Inc. | /s/ Robert Lyons | Robert Lyons | Chief Executive Officer and President | 2021-10-20 |

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.