FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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(h) |

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* Hadden Patricia | | | | | | | 2. Issuer Name and Ticker or Trading Symbol Limelight Networks, Inc. [LLNW] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| | | | | | | | | | | | | | | | | | Direc | ctor | | 10% Owner | | | |
| (Last) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | Officer (give title below) | | | Other (specify below) | | | |
| C/O LIMELIGHT NETWORKS, INC. | | | | | | | | 03/01/2020 | | | | | | | | | | | | | | | |
| 1465 NORTH SCOTTSDALE ROAD, SUITE 400 | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | . 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | |
| SCOTTSDALE AZ 85257 | | | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | | (Sta | te) (2 | Zip) | | | | | | | | | | | | | | | | | | | |
| | | | Tabl | e I - Nor | ı-Deriv | ative | Se | ecuriti | es Ac | quired | d, Dis | sposed o | of, o | r Ben | efici | ally (| Owne | ed | | | | | |
| Date | | | | | | te onth/Day/Year) if | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction D | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 4 and Sec Ben Owi | | cially I Following | Form (D) or | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | | | e V | Amount | | (A) or (D) | Price | • | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Common Stock 03/01/ | | | | | | L/2020 |) | | | | | 775 | | D \$5 | | .05 84,079(2) | | 1,079 ⁽²⁾ | | D | | | |
| | | | Та | | | | | | | | | osed of, onvertil | | | | | vned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversi or Exerci Price of Derivativ Security | rsion rcise f ive | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, Transa Code (I | | | n of r. Deri Sec Acq (A) Disp of (I (Ins | of I | | 6. Date Exercis Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) | | str. 3 | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | / O F D o (!) | LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | Code V | | (A) (D) | | Date Exercisable | | Titl | Amount or Number of le 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 3,520 restricted stock units.
- 2. This includes 70,337 unvested restricted stock units.

Remarks:

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
** Signature of Reporting Person

Date

03/03/2020

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.