FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Falk Thomas					2. Issuer Name and Ticker or Trading Symbol Limelight Networks, Inc. [LLNW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
-														X		Director 10% Owner Officer (give title Other (specify				
(Last)	(Fi	rst) (Middle)					t Trans	action (N	Month	/Day/Year)				belov			below		
C/O LIMELIGHT NETWORKS, INC.					12/01/2011															
222 SOUTH MILL AVENUE, 8TH FLOOR					4. If A	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)	Eorn	n filed by Or	no Bono	rting Dorg	con	
TEMPE	AZ	Z 8	35281											^		n filed by Mo		•		
(City)	(St	ate) (Zip)																	
		Tabl	e I - No	n-Deriva	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, or E	Benefi	cially	/ Owne	ed				
Dat			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a 5)			and Securities Beneficially Owned Follo		ies cially Following	6. Own Form: (D) or I (I) (Inst	Direct ndirect tr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pric	се	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Common Stock				12/01/2011				F ⁽¹⁾		985	D	\$3	.01(1)	1 ⁽¹⁾ 46,590 ⁽²⁾		I	D		
Common	Stock														I 603 205 I I I				See footnote ⁽³⁾	
Common Stock														197,500 ⁽⁴⁾				See footnote ⁽⁵⁾		
		Та									osed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution if any			tion estr.	of		6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Evercis		Expiration	Title	or Number	er						

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 3,281 restricted stock units.
- 2. Includes 29.532 unvested restricted stock units.
- 3. Shares held by VEST Europe GmbH for which the Reporting Person is the sole shareholder and has voting and dispositive power.
- 4. Includes 111.094 unvested restricted stock units.
- 5. Shares held by eValue AG, which the Reporting Person serves as Chief Executive Officer and managing director and has voting and dispositive power.

Remarks:

Executed pursuant to the Limited Power of Attorney for Section 16 reporting obligations dated April 29, 2010.

Thomas Falk by: /s/ James R. 12/02/2011 Todd, Attorney-in-Fact

** 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.