FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | |
|---|------------------------|-----------|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | |
| | Estimated average burd | en | | | | |
| 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* Hatfield David | | | | | | | 2. Issuer Name and Ticker or Trading Symbol Limelight Networks, Inc. [LLNW] | | | | | | | | | all app Direc | olicable) | | | Ssuer Owner (specify |
|--|--|-----------|---|--|---|--|---|---|------------------------|---|---------------------|---|------------------------|--|--|------------------|---|---|---|--|
| | (Fii ELIGHT N TH MILL A | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2012 | | | | | | | | | X | Sen | ow) below nior VP, Prod, Market, Sa | | | | | | |
| (Street) TEMPE AZ 85281 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | 2A. Deemed | | | 3. Transa Code (| | Disposed | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | 4 and See Be | | ount of ties cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (I | A) or D) | Price | • | Transa | Reported Transaction(s) (Instr. 3 and 4) | | | (msu. 4) |
| Common | Stock | 2/31/2012 | | | | F ⁽¹⁾ | | 82,280 | 0 D \$2 | | \$2. | .22 422,72 | | 2,729(2) | D | | | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y O\ | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | | 4. Transaction Code (Instr. 8) | | of Derive Secur Acqu (A) or Dispo of (D) (Instr | 5. Number of Expiration (Month/Day Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Nun of Sha | nber res | | | | | | |

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 176,000 restricted stock units.
- 2. This includes 268,750 unvested restricted stock units.

Remarks:

Executed pursuant to the Limited Power of Attorney for Section 16 Reporting Obligations dated June 22, 2009.

David M. Hatfield by: /s/

James R. Todd, Attorney-in-

Fact

** Signature of Reporting Person Date

01/03/2013

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.