SEC Form 4	
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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
hours per response:	0.5				

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). П

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person <sup>*</sup> <u>Edenbrook Capital, LLC</u>			2. Issuer Name and Ticker or Trading Symbol <u>MARCHEX INC</u> [ MCHX ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (nive title Other (specify								
(Last) (First) (Middle) 116 RADIO CIRCLE SUITE 202					3. Date of Earliest Transaction (Month/Day/Year) 08/06/2021							Officer (give title Other (specify below) below)						
(Street) MOUNT NY 10549 KISCO				4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City)	(Si	ate) (2	Zip)															
		Table	I - Non-Deriva	ative	Sec	uritie	es A	cquir	red, I	Disposed	of, or	Benefi	cially Ow	ned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution Date,		Ċ.	3. Transaction Code (Instr. 8)				d (A) or tr. 3, 4 and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 a					
Class B c	common sto	ck											1,322	338	Ι		See footn	otes <sup>(2)(3)</sup>
Class B C	Common sto	ock	08/06/202	1				Р		25,100	A	\$2.987	76 12,147	,857	I		See footn	otes <sup>(1)(3)</sup>
Class B C	Common sto	ock	08/06/202	1				Р		26,600	A	\$2.93	2 12,174	,457	I		See footn	otes <sup>(1)(3)</sup>
Class B C	Common sto	ock	08/06/202	1				Р		2,105	A	\$2.899	9 12,176	,562	I		See footn	otes <sup>(1)(3)</sup>
Class B C	Common sto	ock	08/09/202	1				Р		6,521	A	\$2.943	32 12,183	,083	I		See footn	otes <sup>(1)(3)</sup>
Class B C	Common sto	ock	08/10/202	1				Р		12,973	A	\$2.898	35 12,196	,056	I		See footn	otes <sup>(1)(3)</sup>
Class B C	Common sto	ock	08/10/202	1				Р		2,500	A	\$2.9	12,198	,556	I		see footn	otes <sup>(1)(3)</sup>
		Tal	ole II - Derivat (e.g., pu							isposed o s, convert				d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		isactioi e (Instr	n of r. De Se Ac (A) Dis of (In	Numb curitic curitic cquirec ) or spose (D) str. 3, d 5)	mber 6. Date Exercisabl Expiration Date (Month/Day/Year) ities sed 3, 4		n Date Amount of		8. Price of Derivative Security (Instr. 5) r.	deriva Secur Benet Owne Follov Repor Trans	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		ship (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	) (□	) Da	te ercisal	Expiratio Date	on Title	Amour or Numbe of Shares	er					
	nd Address o r <mark>ook Cap</mark> i	f Reporting Person <sup>*</sup> . <u>tal, LLC</u>																
(Last) 116 RAI SUITE 2	DIO CIRCL	(First) . <mark>E</mark>	(Middle)															
(Street) MOUNT	T KISCO	NY	10549															

1. Name and Address of Reporting Person\*

(State)

(City)

EDENBROOK LONG ONLY VALUE FUND,

(Zip)

<u>LP</u>									
(Last)	(First)	(Middle)							
116 RADIO CIRCLE									
SUITE 202									
(Street)									
MOUNT KISCO	NY	10549							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person <sup>*</sup> Brolin Jonathan									
(Last)	(First)	(Middle)							
116 RADIO CIRC	LE								
SUITE 202									
(Street)									
MOUNT KISCO	NY	10549							
(City)	(State)	(Zip)							

## Explanation of Responses:

1. These securities are held in the account of Edenbrook Long Only Value Fund, LP, a private fund managed by Edenbrook Capital, LLC and may be deemed to be beneficially owned by Edenbrook Capital, LLC by virtue of its role as the investment manger of such private fund. In addition, Jonathan Brolin may be deemed to be a beneficial owner of such securities by virtue of his role as managing member of Edenbrook Capital, LLC.

These securities are held in the account of a private fund managed by Edenbrook Capital, LLC and may be deemed to be beneficially owned by Edenbrook Capital, LLC by virtue of its role as the investment manager of such private fund. In addition, Jonathan Brolin may be deemed to be a beneficial owner of such securities by virtue of his role as managing member of Edenbrook Capital, LLC.
 Each Reporting Person disclaims beneficial ownership in the securities reported on this Form 4 except to the extent of its or his pecuniary interest, if any, therein, and this report shall not be deemed to be an admission that such Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Edenbrook Capital, LLC; By:	
/s/ Jonathan Brolin, Managing	08/10/2021
<u>Member</u>	
<u>/s/ Jonathan Brolin</u>	08/10/2021
<u>Edenbrook Long Only Value</u>	
<u>Fund, LP, By: /s/ Jonathan</u>	
Brolin, Managing Member of	08/10/2021
<u>Edenbrook Capital Partners,</u>	
LLC	
** 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.