FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| 1. Name and Address of Reporting Person* | | | | | 2. Issuer Name and Ticker or Trading Symbol MARCHEX INC [MCHX] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|-----------------------------------|---|--------------------|--|---|---|------|------------------|---|-----------------|--|---------------------------------------|---|------------------|--------------------------------------|---|---|-----------------|--|
| KEISTER JOHN | | | | | | | | | | | | | | | X | Direc | ctor 10% | | 10% C | wner |
| (Last) | (Fi | 3. D | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | X | | Officer (give title below) | | Other below) | (specify | | | |
| (Last) (First) (Middle) 520 PIKE STREET | | | | | | | 04/21/2010 | | | | | | | | | | President | | | |
| SUITE 2 | | | | | | | | | | | | | | | | | | | | |
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| (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | o. Inar Line) | viduai o | Joint/Group Filing (Check Applicable | | | ppiicable |
| SEATTL | E W | Δ | 98101 | | | | | | | | | | | | | Forn | Form filed by One Reporting Person | | | |
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| (City) | | | | | | | | | | Pers | on | | | | | | | | | |
| (City) | (31 | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, o | r Ben | efici | ially | Owne | ed | | | |
| Dat | | | | Date | . Transaction ate Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | Disposed | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | Securi Benefi | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | (| | Code | v | Amount | | (A) or (D) | Pric | e | Report Transa | | , | | (Instr. 4) | | |
| Class B Common Stock 04/21/ | | | | | /2010 | 2010 | | | S ⁽¹⁾ | | 20,000 | 0 | D | \$5 | 5.13 | | 36,948 | D | | |
| Class B C | ommon Sto | ock | | 04/22 | /2010 | | | | S ⁽¹⁾ | | 20,000 | 0 | D | \$4 | .99 | 9 366,948 D | | | | |
| Class B C | ommon Sto | ock | 50,129 I | | | | | | | By GRAT | | | | | | | | | | |
| Class B Common Stock | | | | | | | | | | | | | | | 6,160 | | 5,160 | I | | By IRA |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date Exe (Month/Day/Year) if a | if any | cution Date, ly | | 4. Transaction Code (Instr. B) | | ı of | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | r) Amo Sec Und Deri | | str. 3 | Deri Sec | rice of vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form Direct or Inc (I) (In | t (D) lirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | Cod | | Code | v | (A) | (D) | Date Evercisa | | Expiration | Title | or Nur of | ount nber | | | | | | | | |

Explanation of Responses:

 $1. \ The sales \ reported \ on this \ Form \ 4 \ were \ effected \ pursuant \ to \ a \ Rule \ 10(b) 5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$

John Keister 04/23/2010

** 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.