FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

	1011 10.				_															
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Wisehart Manuel W					MARCHEX INC [MCHX]								1,	V V	Directo	,		ner		
					<u></u>								_			(give title		Other (s	pecify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 11/06/2024								below)			below)				
1200 5TH AVE					11/	00,2	021													
SUITE 1300					4 If	4. If Amendment, Date of Original Filed (Menth/Day/A/a-a-)							- 6	6. Individual or Joint/Group Filing (Check Applicable						
						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)						
(Street)														1	Form fi	led by One	Repo	orting Perso	ո	
SEATTL 	E W	'A	98101												Form fi Person		e than	One Repor	ting	
(City)	(S	tate)	(Zip)																	
		Tab	le I - Non-	-Deriva	ative	Se	curities	s Ac	quired, D	ispo	osed o	f, or Be	neficia	ally (Owned					
1. Title of Security (Instr. 3) 2. Transac				ction 2A. Deemed Execution Date.			3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3									7. Nature of Indirect				
					Day/Year) if any (Month/Day/Year)			Code (Instr. 5)			0,	_	Beneficia Owned F	ally (D) o		or Indirect	Beneficial Ownership			
						((A) or	Price	\dashv	Reported Transaction(s)		(,, ((Instr. 4)		
								Code V		Amount	mount (A) or F		<u> </u>	(Instr. 3 and 4)						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			(6	e.g., pı	uts,	calls	s, warra	ants	, options	, co	nvertik	ole secu	rities)							
1. Title of Derivative	2. Conversion	3. Transaction Date	3A. Deemed Execution Da		4. Transaction		5. Number		6. Date Exercisable and Figure 5. Title and All Expiration Date of Securities				nount 8. Price of Derivative		9. Number of derivative		10. Ownership	11. Nature		
Security	curity or Exercise (Month/Day/Year) if any			Code (Inst			nstr. Derivative Securities Acquired		(Month/Day/Year) Underlying Derivative Securities (Instr. 3 and 4)				g	Security		Securities Beneficially Owned		Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)	
(IIISII. 3)				rear) o	1															
					(A) or Disposed of (D) (Instr. 3, 4 and 5)									Following Reported Transaction(s) (Instr. 4)		(I) (Instr. 4)				
													Amoun	t						
													or Numbe	r						
				c	ode	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	of Shares							
Employee														T						
Stock Option	\$1.8	11/06/2024			A		50,000		(1)	11/0	06/2034	Class B Common	50,00	0	\$ <mark>0</mark>	50,000		D		
(right to buy)												Stock								

Explanation of Responses:

1. Option grant effective on the Grant Date with 50% of such options vesting on November 6, 2025 and November 6, 2026, respectively, assuming continued service on the Board for such period and with vesting in full of all such options upon a Change of Control (as defined in such reporting person's option agreement).

/s/ M. Wayne Wisehart

11/07/2024

** 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.