Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**BENEFICIAL OWNERSHIP** 

STATEMENT OF CHANGES IN
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**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* <u>Yen Mallun</u>							2. Issuer Name and Ticker or Trading Symbol RPX Corp [ RPXC ]									of Reporting Perscable) or (give title		son(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) C/O RPX CORPORATION ONE MARKET PLAZA, SUITE 800						3. Date of Earliest Transaction (Month/Day/Year) 08/01/2013									below)			below)	
(Street) SAN FRANCISCO CA 94105				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)																			
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/				tion	2A. D Exec if any	eeme	ed Date,	3. Transaction Code (Instr. 8) 4. Securitie: Disposed O			Acquired	(A) or	5. Amou Securiti Benefici		int of es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and		tion(s)				
Common Stock 08/01/201					2013	13			<b>M</b> <sup>(1)</sup>		10,000	A	\$6.63	63 10		,000		D	
Common Stock 08/01/202				2013	3			S <sup>(1)</sup>		10,000	D	\$17.451	.4518 <sup>(2)</sup>		0		D		
		٦	Table I	I - Deriv (e.g.,	ative puts,	Secu calls	ıritie s, wa	s Acq arrants	uired s, opt	l, Dis ions,	posed of, convertil	or Ber ble sec	neficially urities)	y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	e V (		(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to	\$6.63	08/01/2013			M			10,000	(3	3)	11/15/2020	Commor Stock	10,000		\$0	556,00	0	D	

## **Explanation of Responses:**

- 1. The transaction reported was effected pursuant to a 10b5-1 trading plan adopted by reporting person on February 28, 2013.
- 2. The price reported in column 4 is the weighted average price. The shares were sold in multiple transactions ranging from \$17.37 to \$17.54, inclusive. The reporting person hereby undertakes to provide to the SEC staff, the Issuer or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. The option representing the right to purchase a total of 700,000 shares vests as follows: 1/4th of the shares subject to the option vest on November 1, 2011, subject to the Reporting Person's continuous service with the Issuer through such date, and with respect to 1/48th of the shares subject to the option vest when the Reporting Person completes each month of continuous service thereafter.

## Remarks:

Martin Roberts, Attorney-in-Fact for Mallun Yen

08/01/2013

\*\* 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.