MARCHEX INC Form 4 January 07, 2010

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Class B

Stock

Class B

Common

Common

(Print or Type Responses)

1. Name and Address of Reporting Person * ARENDS MICHAEL A			5. Relationship of Reporting Person(s) to Issuer				
	MAR	CHEX INC [MCHX]	(Check all applicable)				
(Last) (First)		of Earliest Transaction					
520 PIKE STREET, SUITI		/Day/Year) 2010	Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer				
(Street)		nendment, Date Original	6. Individual or Joint/Group Filing(Check				
	Filed(M	onth/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
SEATTLE, WA 98101			Person				
(City) (State)	(Zip) Ta	ble I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned				
1.Title of Security (Month/Day/Yea (Instr. 3) Class B		Code (Instr. 3, 4 and 5)	5. Amount of Securities Ownership Indirect Beneficially Form: Direct Owned (D) or Ownership Indirect (I) (Instr. 4) Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)				
Common 01/06/2010 Stock		S(1) 21,650 D 4.826	5 229,000 D				
Class B Common Stock			15,000 I By IRA				

By IRA

Arends

By Trust

for Nicole

for Diana

6,500

10,500

I

I

Stock Marie (3)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

9. Nu Deriv

Secur Bene Own Follo Repo Trans (Instr

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	ate	7. Title Amoun Underly Securit (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)
				Code \	V (A) (D)	Date Exercisable	Expiration Date	Title I	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

ARENDS MICHAEL A 520 PIKE STREET SUITE 1800 SEATTLE, WA 98101

Chief Financial Officer

Signatures

Michael A. Arends 01/07/2010

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (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.
- This transaction was executed in multiple trades at prices ranging from \$4.80 to \$4.872. The price reported above reflects the weighted

(2) average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, Marchex or a stockholder of Marchex full information regarding the number of shares and prices at which the transaction was effected.

Reporting Owners 2

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(3) Reporting person disclaims beneficial ownership.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.