FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Barker Geoffrey T						2. Issuer Name and Ticker or Trading Symbol RPX Corp [RPXC]								(Check all app		ctor 10%		Owner	
(Last) (First) (Middle) C/O RPX CORPORATION ONE MARKET PLAZA, SUITE 800						3. Date of Earliest Transaction (Month/Day/Year) 02/11/2014								X	Offic below	,	Other (specify below) ve Director		
(Street) SAN FRANCI (City)			94105 Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	,				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Securit Benefic Owned		icially d 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			action(s) 3 and 4)		(msu. 4)	
Common	Stock			02/11/2	014				S ⁽¹⁾		7,500	D	\$15.62	292 ⁽²⁾	5	64,417	D		
Common Stock 0.			02/12/2)14				S ⁽¹⁾		7,200	D	\$16.9	185 ⁽³⁾	85 ⁽³⁾ 557,21		D			
Common Stock 02/1:			02/12/2	014	14			S ⁽¹⁾		300	D	\$17	44 556		56,917	D			
Common	Stock														121,732 I				
Common	Stock													188,714 ⁽⁴⁾ I By GR.				By GRAT	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Security or Exercise (Instr. 3) Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Security Execution Date, if any (Month/Day/Year) Security Secu				4. Transa Code 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities ired r osed) r. 3, 4	Expi (Mor	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr.: and 4) Amount or Number of Title Shares		Deriv Secu (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- $1. \ The \ sale\ reported\ was\ effected\ pursuant\ to\ a\ 10b5-1\ trading\ plan\ adopted\ by\ reporting\ person\ on\ May\ 15,\ 2013.$
- 2. The price reported in column 4 is the weighted average price. The shares were sold in multiple transactions ranging from \$15.39 to \$15.97, 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 footnotes (2) and (3) to this Form 4.
- 3. The price reported in column 4 is the weighted average price. The shares were sold in multiple transactions ranging from \$16.43 to \$17.35, inclusive.
- 4. Shares held by Geoffrey T. Barker, Trustee of the Geoffrey T. Barker 2010 3-Year GRAT, dated December 29, 2010.

Remarks:

Martin Roberts as Attorney-In-02/12/2014 Fact for Geoffrey T. Barker

** Signature of Reporting Person

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.