FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
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| Check this box if no longer subject | t to |
|-------------------------------------|------|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(h) | |

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

| | d Address of | | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
|---|--|---|---|-------------------------------------|-------|--|---|-----------|---|-----------------|--|---|--|---|--|------------------------|---|-----------|
| <u>Campio</u> | <u>on Trevor</u> | 1 | RPX Corp [RPXC] | | | | | | | | Director | | | 10% | Owner | | | |
| (Leat) | L | | | | | | | | | | Officer (give title below) | | Othe belov | r (specify v) | | | | |
| (Last) C/O RPX | Fi CORPOR | | 3. Date of Earliest Transaction (Month/Day/Year) 05/17/2017 | | | | | | | | CEO, Inventus | | | | | | | |
| ONE MARKET PLAZA, STEUART TOWER STE. 800 | | | | | | | | | | | | | | | | | | |
| (0) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) SAN | • | | | | | | | | | | | | X Form filed by One Reporting Person | | | | rson | |
| | ANCISCO CA 94105 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | |
| (City) | (St | tate) (| Zip) | | | | | | | | | | | | | | | |
| | | Tabl | e I - 1 | Non-Deriv | ative | Seci | uritie | s Ac | quire | ed, Di | sposed o | f, or E | Benefici | ally (| Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yell) | | | | | | Execution | | ion Date, | | ction Instr. | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | Secur Benet Owne | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Common |)17 | 17 | | | S | | 10,000 | D | \$14.03 | \$14.0378(1) | | 5,571 | D | | | | | |
| | 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 | ercise of ative (Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Derivative Securities Acquired | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. The price reported in column 4 is the weighted average price. The shares were sold in multiple transactions ranging from \$14.00 to \$14.10, 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 (1) to this Form 4.

Remarks:

Emily Gavin, Attorney-in-Fact for Trevor Campion 05/19/2017

** 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.