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 b	ourden								

0.5

hours per response:

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

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* Filip Eve						2. Issuer Name <b>and</b> Ticker or Trading Symbol RUBICON PROJECT, INC. [ RUBI ]									(Check all ap		licable)		Issuer Owner r (specify
(Last) (First) (Middle) C/O THE RUBICON PROJECT, INC.						3. Date of Earliest Transaction (Month/Day/Year) 11/18/2019									X	belov			v)
12181 BLUFF CREEK DRIVE, 4TH FLOOR  (Street) PLAYA VISTA CA 90094  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	ative	Se	curitie	s Acq	uired,	Dis	posed o	f, or	r Ben	efici	ally C	)wne	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution		n Date,	Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			nd S	5. Amount of Securities Beneficially Owned Following Reported		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	.  -	Transaction(s) (Instr. 3 and 4)			(1130.4)
Common Stock 11/18/				8/2019				S <sup>(1)</sup>		2,290		D	\$7.5	<sup>7(2)</sup>	7 <sup>(2)</sup> 122,516 <sup>(3)</sup>		D		
		Та							,		sed of, onvertib				,	ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, Transaction Code (Ins			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				ivative urity	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)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	of	nber					

## **Explanation of Responses:**

- 1. Represents the non-discretionary sale of shares on behalf of the reporting person pursuant to an arrangement mandated by the Issuer to cover the tax withholding obligations associated with the vesting of restricted stock units.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.55 to \$7.57, inclusive. The reporting person undertakes to provide The Rubicon Project, Inc., any security holder of The Rubicon Project, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 3. Adjusted to reflect the acquisition of 801 shares under The Rubicon Project, Inc. 2014 Employee Stock Purchase Plan on November 15, 2019.

## Remarks:

/s/ Jonathan Feldman, attorneyin-fact 11/19/2019

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.