FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

· ·	OMB APPRO
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:

		OIVID APPROVAL					
BENEFICIAL OWNERSHIP	ОМ	IB Number:	3235-0287				
	Esti	Estimated average burden					

hours per response:

0.5

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 and Ticker or Trading Symbol RUBICON PROJECT, INC. [RUBI]									Check	all app	p of Reportin blicable) ctor er (give title	10	% O	wner		
(Last) (First) (Middle) C/O THE RUBICON PROJECT, INC. 12181 BLUFF CREEK DRIVE, 4TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 01/15/2019									X	belov	v) ``		Other (specify below)		
(Street) PLAYA VISTA CA 90094 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivine)						
		Tabl	e I - Non	-Deriva	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Da		Date,	Date, Transaction Code (Instr						, 4 and		5. Amount of Securities Beneficially Owned Following Reported		t ect	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) or (D)		Price	•	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 01/15/			2019			F ⁽¹⁾		13,97	13,970 D \$		\$4.	02 69,588		9,588	D					
		Та	ible II - D								sed of, onvertib				y Ov	vned				
Derivative Conversion Dat			3A. Deemed Execution Date, if any (Month/Day/Year)	Date,	4. Transaction Code (Instr. 8)		of		6. Date E Expiratio (Month/D	Amount of		str. 3	8. Price Deriva Securi (Instr. !		ative derivative rity Securities	Owners Form: Direct (or Indir (I) (Inst) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount nber ires						

Explanation of Responses:

1. Shares withheld by the issuer to cover the reporting person's tax liability incurred upon the vesting of the reporting person's restricted stock units.

Remarks:

/s/ Jonathan Feldman, attorney-01/17/2019 in-fact

** 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.