FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasiiingtori, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		

OMB Number:	3235-0287									
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 S	Sectio	n 30(h)	of the	Invest	ment C	omp	pany Act o	of 194	40							
1. Name and Address of Reporting Person*  KOKICH CLARK M			2. Issuer Name <b>and</b> Ticker or Trading Symbol LiveRamp Holdings, Inc. [ RAMP ]											all app		ıg Per	10% O	wner			
(Last) (First) (Middle) LIVERAMP HOLDINGS, INC. 225 BUSH STREET, 17TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2019												belov	er (give title v)		Other ( below)	specify	
(Street) SAN FRANCI			)4104 Zip)		4. If	Ame	ndment	, Date o	of Orig	inal File	ed (	(Month/Da	ay/Yea	ar)		Indivi ne) X	Form	r Joint/Group n filed by One n filed by Mor on	e Rep	orting Pers	on
		Tabl	e I - Non-I	Deriva	tive	Sec	curitie	s Ac	quire	ed, Di	sp	osed o	f, or	Bene	ficia	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ar)   E	A. Deemed xecution Date, any Month/Day/Year)		Co	Transaction Code (Instr.						5. Amount of Securities Beneficially Owned Following		Forr (D) (	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Co	ode V		Amount		(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
COMMON STOCK, \$.10 PAR VALUE 02/20/				02/20/	/2019				G \	V	5,000 <sup>(1)</sup> D		\$	70,629		0,629		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  3. Transaction Date Execution Date, if any (Month/Day/Year)			ate, T	ransa Code (		of		Expir	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	F I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exerc	cisable		xpiration ate	Title	Amo or Num of Sha	ber						

## **Explanation of Responses:**

1. The reporting person donated these shares to a charitable organization.

/s/ By: Catherine L. Hughes, Attorney-in-Fact For: Clark M. 02/21/2019 Kokich

\*\* 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.