FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
		_00.0	

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPRO	DVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Instruction 1(b)

Form 3	Holdings Repo	rted.													urs per	гезропас.	1.0	╛
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Exch ompany A									
Name and Address of Reporting Person* Gupta Anneka R.					2. Issuer Name and Ticker or Trading Symbol LiveRamp Holdings, Inc. [RAMP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify							
	(Fir MP HOLDI H STREET,	,								ı/Year)	X Officer (give title Other (specify below) PRES.&HEAD-PRODUCTS/PLATFORMS							
(Street) SAN FRANCI	SCO CA	<u> </u>	94104	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	-,						
(City)	(Sta	ate) (2	Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)			or Disposed	5. Amou Securitie Benefici Owned a		es Ow ally Fo		rship Direct	7. Nature of Indirect Beneficial Ownership		
				(month in Buy) 11	cui,	8)		Amoun	t	(A) or (D)	Price	Issuer's Fi Year (Instr 4)		iscal Indire		ect (I) (Instr. 4)		
COMMON STOCK, \$.10 PAR VALUE		03/31/2019				J		204.6521(1)		\$0		1,423.1433		I		BY MANAGED ACCOUNT 1		
COMMON STOCK, \$.10 PAR VALUE												226,727		1	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)	vative urity or Exercise (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Price of Derivative Security Security Execution Date, if any (Month/Day/Year) Security Transaction Code (Instr. 8) Security Security Security Security Security Security On Disp		osed)) r. 3, 4	Expi	te Exercisable and ration Date th/Day/Year)		Amo Seci Und Deri Seci and	tle and bunt of urities erlying vative urity (Instr. 3 4) Amount or Number of Shares	Dei Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficia Ownershi ct (Instr. 4)	t I			

Explanation of Responses:

 $1.\ These \ shares \ were \ acquired \ during \ fiscal \ 2019 \ under \ the \ Company's \ 401(k) \ Retirement \ Savings \ Plan.$

/s/ By: Catherine L. Hughes,

05/03/2019 Attorney-in-Fact For: Anneka

R. Gupta

** 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.