FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response	e: 0.5						

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*  JENSON WARREN				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  X Officer (give title Other (specify					ner		
(Last) (First) (Middle) LIVERAMP HOLDINGS, INC. 225 BUSH STREET, 17TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022									PRESIDENT, CFO & EMD-INT'L							
(Street) SAN FRANCI	sco CA	<b>A</b> 9	94104	4	4. If Amendment, Date of Original						Line) X Form					r Joint/Group Filing (Che filed by One Reporting filed by More than One on			p Person	
(City)	(St	rate) (2	Zip)																	
		Table	: I - N	lon-Deriva	tive	Secu	rities	Ac	quire	ed, D	isposed	of, or	Benefic	ially Own	ed					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar 5)			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 (Instr. 3 and	n(s) d 4)	(111501.4)		(iiisii.	4)	
COMMON STOCK, \$.10 PAR VALUE		UE	02/15/2022					A		217(1)	A	\$0	205,3	22	D					
COMMON STOCK, \$.10 PAR VALUE		02/15/2022					F		45 <sup>(2)</sup>	D	\$41.68	205,277		D						
COMMON STOCK, \$.10 PAR VALUE													2,339.5	268	I			NAGED COUNT		
COMMON STOCK, \$.10 PAR VALUE													517.96	594	I			NAGED COUNT		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Derivativ		ative rities ired sed	Exp (Mo	iration	ercisable and Date y/Year)	Amo Secu Unde Deriv		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exe	e rcisabl	Expiratio le Date	n Title	Amount or Number of Shares							

## Explanation of Responses:

- 1. These shares were earned by the reporting person in connection with the performance stock units (PSU) granted pursuant to the 2005 Equity Compensation Plan to the reporting person in 2018. Of the earned amount, one-half immediately vested, and the remaining one-half will vest on February 15, 2023, contingent upon the reporting person's continued employment with the Issuer.
- 2. These shares were withheld by the Issuer to satisfy the reporting person's tax obligations that arose on February 15, 2022 as a result of the vesting disclosed above.

/s/ By: Catherine L. Hughes, Attorney-in-Fact For: Warren 02/17/2022 Jenson

\*\* 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.