## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Washington, D.C. 200 10 |
|-------------------------|
|                         |
|                         |

OMB APPROVAL

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

defense conditions of Rule 10b5-

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person*     Bloomston Kimberly   |   |         |         | 2. Issuer Name and Ticker or Trading Symbol LiveRamp Holdings, Inc. [ RAMP ] |   |  |   |   |  |          |           | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)                          |   |   |   |   |   |   |  |
|--|---|---------|---------|--|---|--|---|---|--|----------|-----------|--|---|---|---|---|---|---|--|
| Biodiistoii Kiinocriy  |   |         |         |  |   |  |   |   | .0 = /-  |          |           |  |   | ma.   | Direct<br>Office  | tor<br>er (give title   |   | 10% Ov<br>Other (s  |  |
| (Last)   | (Fii  | rst) (f | Middle) |  | Date of Earliest Transaction (Month/Day/Year) |  |   |   |  |          |           | $\dashv$   | 1   | belov   | ow) `   |   | below)  | ` <i>`</i>  |  |
| LIVERAMP HOLDINGS, INC.  |   |         |         |  | 12/30/2024                                    |  |   |   |  |          |           |  |   | CHI   | EF PROD   | UCI   | OFFICE  | K   |  |
| 225 BUSH STREET, 17TH FLOOR  |   |         |         |  |   |  |   |   |  |          |           |  |   |   |   |   |   |   |  |
| (Street)   |   |         |         |  | 4. If A                                       | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |   |  |          |           |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |   |   |   |  |
| SAN  | C.  |         | 1104    |  |   |  |   |   |  |          |           |  | ٦   | <b>V</b>  | Form filed by One Reporting Person                                |   |   |   | on   |
| FRANC  | ISCO CA   | 4 9     | 04104   |  |   |  |   |   |  |          |           |  |   |   | Form filed by More than One Reportin Person                       |   |   |   | orting   |
| (City)   | (St   | ate) (2 | Zip)    |  |   |  |   |   |  |          |           |  |   |   |   |   |   |   |  |
|  |   | Table   | I - No  | on-Deriva  | tive S  | Secui  | rities  | Acq   | uirec  | l, Dis   | sposed of | , or B   | enefic  | ially   | Own   | ed  |   |   |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/   |   |         |         |  | Execution Date,                               |  | te,   | 3.<br>Transaction<br>Code (Instr.<br>8)  4. Securities<br>Disposed Of |  |          |           |  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |   |  |
|  |   |         |         |  |   |  |   |   | Code   | v        | Amount    | (A) or<br>(D)  | Price   |   | Transa  | ransaction(s) ratr. 3 and 4)  |   |   | (Instr. 4)   |
| COMMON STOCK, \$.10 PAR VALUE 12/30/20   |   |         |         |  | 024   |  |   | S   |  | 9,729(1) | D         | \$30.4   | 41 <sup>(2)</sup> 99,13   |   | 9,130   | D   |   |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |         |         |  |   |  |   |   |  |          |           |  |   |   |   |   |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any |         |         | ition Date,  | Transaction<br>Code (Instr.<br>8)             |  | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |          |           | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |   | Der<br>Sec<br>(Ins  | Price of<br>erivative<br>ecurity<br>estr. 5)                      | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | y   | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |   |         |         |  |   |  |   |   |  |          |           |  | Amount<br>or<br>Number  |   |   |   |   |   |  |

## Explanation of Responses:

- 1. The sales reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 30, 2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$30.09 to \$30.67, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.

(D)

Date

Expiration

/s/ BY: JERRY C. JONES, ATTORNEY-IN-FACT FOR: 12/31/2024 KIMBERLY BLOOMSTON

\*\* 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.