| SEC Form 4 |
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| FORM 4 |

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| | APPRO\ | /// 1 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWN |
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| 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 |

BENEFICIAL OWNERSHIP

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

| 1. Name and Address of Reporting Person | | | 2. Issuer Name and Ticker or Trading Symbol LiveRamp Holdings, Inc. [RAMP] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|----------|--|---|-------------------------------|-------------|------------------------------------|----------------------|---------------|---|---|---|----------|--|--|
| KOKICH CLARK M | | | | | | | | | | | Director | 10% 0 | Owner | | |
| (Last) | (First) | (Middle) | | | e of Earliest Transa /2024 | ction (N | lonth/ | Day/Year) | | Officer (give title below) | Other below | (specify) | | | |
| 1 | OLDINGS, INC. EET, 17TH FLOO |)R | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Indi Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| 223 20011011 | | | | | | | | | | 1 | Form filed by On | e Reporting Per | son | | |
| (Street) SAN | | | | | | | | | | | Form filed by Mo Person | re than One Re | porting | | |
| FRANCISCO | CA | 94104 | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | |
| (City) | (State) | (Zip) | | Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instru | | | | | | | | | | | |
| | Tab | tive S | ecurities Acqu | uired, | Disp | oosed of, o | or Ber | eficially | / Owned | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Disposed Of 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(s) (Instr. 3 and 4) | | (1130.4) | | |
| COMMON STC | OCK, \$.10 PAR VA | LUE | 08/14/2 | 2024 | | A | | 2,252 ⁽¹⁾ | A | \$ <mark>0</mark> | 93,328 | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |

| | | | (* 57)** | ,, | , | | | • • | | | | , | | | | |
|---|---|--|---|------------------------------|---|-----|-----|---|--------------------|-----------------|--|---|--|---|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | Expiration Date (Month/Day/Year) d d | | Expiration Date | | and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. These shares were issued to the reporting person as part of his compensation for service as a director of the registrant.

| /s/ By: Jerry C. Jones, | |
|--------------------------------|------------|
| Attorney-In-Fact for: Clark M. | 08/15/2024 |
| Kokich | |

** 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.