FORM 4

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

Washington, D.C. 20549

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**OMB APPROVAL** 

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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-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(0). 0	ee mstruction																		
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)					
<u>CADOGAN TIMOTHY R.</u>														Direct	tor		10% Ov	vner	
-														4		er (give title		Other (s	specify
(Last)	(Fi	rst) (f	Middle)		3. Date of Earliest Transaction (Month/Day/Year)								belov	v)		below)			
LIVERAMP HOLDINGS, INC.						11/14/2024													
225 BUSH STREET, 17TH FLOOR																			
223 BUSH STREET, 1/1H FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable								nnlicable						
(044)				4. II Amendment, Date of Original Filed (Month/Day/Year)									individual of Joint/Group Filing (Check Applicable ine)						
(Street) SAN															Form	filed by On	e Rep	orting Perso	on
FRANC	CACCO CA	<b>A</b> 9	4104												Form filed by More than One Reporting				
FRANC	isco														Perso	on		·	Ū
(City)	(St	ate) (2	Zip)																
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	, or I	Bene	ficia	ally Own	ed			
1. Title of	Security (Ins	tr. 3)		2. Transac	ction	2A.	Deeme	d	3.		4. Securiti	es Aco	uired	(A) or	5. Amo	unt of	6. O	wnership	7. Nature
		•,		Date	Execution Date,		Transaction   Disposed Of (D) (Instr. 3,				nd Securit	ties	Forn	n: Direct	of Indirect Beneficial				
(Month/					ay/Year)   if any (Month/Day/Year)		Code (Instr. 5) 8)					Following   (I) (		(Instr. 4)	Ownership				
								<u> </u>	Ī.,		(A	) or			Reported Fransaction(s)			(Instr. 4)	
									Code	۱v	Amount	(D) Prid		Price	(Instr. 3 and 4				
COMMC	N STOCK	, \$.10 PAR VAL	UE	11/14/2	/2024			A		1,406 <sup>(1)</sup> A		\$0	55,439			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
		iai									onvertib					u			
				e.g., pu	113, 00	1115, V	valic	11115,	optioi	15, 6	Oliveitib	16 36	cuii	ues					
1. Title of 2. 3. Transaction 3A. Deemed Execution Date,							5. Number of		6. Date Exercisable and Expiration Date Amou					8. Price of 9. Number Derivative derivative		of 10. Ownership		11. Nature of Indirect	
Security	curity or Exercise (Month/Day/Year) if any			·	Code (Insti		tr. Derivative		Expiration Date Amount of (Month/Day/Year) Securities Underlying Derivative			Secu	Securities		Security Securities		Form:		Beneficial
(Instr. 3)				Day/Year) 8)		Securities Acquired							(Instr. 5)	Beneficiall   Owned			Ownership (Instr. 4)		
	Security				(A) or			Security (Ins			str.		Following	owing (I) (	or Indirect (I) (Instr. 4)	(,			
				Disposed of (D)		3 and 4)			u 4)			Reported Transactio	n(s)						
				(Instr. 3, 4 and 5)										(Instr. 4)					
					$\vdash$		and	"					Τ.	$\dashv$					
												Amount or		unt					
							Date		Expiration		Num	ber							
					Code V (A)		(D)				Title		es						

## **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: 11/15/2024 TIMOTHY R. CADOGAN

\*\* 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.