Instruction 1(b).

FORM 4

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 |
|----------------|----------|
|----------------|----------|

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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|  |

|   | OMB APPROVAL             |     |  |  |  |  |  |  |  |  |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|
|   | OMB Number: 3235-0287    |     |  |  |  |  |  |  |  |  |
|   | Estimated average burden |     |  |  |  |  |  |  |  |  |
| ı | hours per response:      | 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*  Howe Scott E                      |  |  |  |                 | 2. Issuer Name and Ticker or Trading Symbol LiveRamp Holdings, Inc. [ RAMP ] |  |   |                                  |             |                    |  |              | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner  Y Officer (give title Other (specify                   |                |            |  |                           | er   |
|---|--|--|--|-----------------|--|--|---|----------------------------------|-------------|--------------------|--|--------------|---|----------------|------------|--|---------------------------|--|
| (Last) (First) (Middle) LIVERAMP HOLDINGS, INC. 225 BUSH STREET, 17TH FLOOR |  |  |  |                 | Date of E<br>/19/202   | Trans  | saction                                 | n (Mont                          | h/Day/Year) |                    | X Officer (give title Other (specify below)  Chief Executive Officer |              |   |                |            |  |                           |  |
| (Street) SAN FRANCISCO  (City) (State) (Zip)                                |  |  |  | 4. 1            | 4. If Amendment, Date of Original Filed (Month/Day/Year)                     |  |   |                                  |             |                    |  |              | 6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |                |            |  |                           |  |
|   |  | Table                                      | I - Non-Deriv  | ative           | Secu   | rities   | Acc                                     | quire                            | d, Di       | sposed o           | f, or I  |              | ally Own  | ed             |            |  |                           |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea         |  |  | Year)  | Execution Date, |  | ,   1  | 3.<br>Transaction<br>Code (Instr.<br>8) |                                  |             |                    |  |              |   | Form: D (D) or |            | rect Indirect<br>Beneficial                              |                           |  |
|   |  |  |  |                 |  |  | C                                       | Code                             | v           | Amount             | (A) or<br>(D)  | Price        | Transactio<br>(Instr. 3 an  |                | (111311.4) |  | (111341. 4                | "  |
| COMMON STOCK, \$.10 PAR VALUE 08/19/2021                                    |  |  | 21   |                 |  |  | F                                       |                                  | 1,537(1)    | D                  | \$44.21  | 721,5        | 60  | D              |            |  |                           |  |
| COMMON STOCK, \$.10 PAR VALUE   |  |  |  |                 |  |  |   |                                  |             |                    |  |              | 3,148.0   | )113           | I          |  |                           | AGED<br>DUNT   |
|   | 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)                         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year |                 | saction<br>e (Instr.   | 5. Nur<br>of<br>Deriva<br>Secur<br>Acqui<br>(A) or<br>Dispo<br>of (D)<br>(Instr.<br>and 5) | ative<br>ities<br>ired<br>sed           | Expiration Date (Month/Day/Year) |             |                    | Date Amount of   |              | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   |                |            | 10.<br>Owner<br>Form:<br>Direct<br>or Indii<br>(I) (Insi | ship c<br>(D) c<br>rect ( | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |  | Code            | e V (A) (D)  |  | (D)                                     |                                  |             | Expiration<br>Date | Title  | of<br>Shares |   |                |            |  |                           |  |

## **Explanation of Responses:**

1. These shares were withheld by the Issuer to satisfy the reporting person's tax obligations that arose on August 19, 2021, when restricted stock units belonging to the reporting person vested.

/s/ By: Catherine L. Hughes, Attorney-in-Fact For: Scott E. 08/20/2021

Howe

\*\* 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.