FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bur	den								
hours per respense:	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

Name and Address of Reporting Person* LOCASCIO ROBERT P						2. Issuer Name and Ticker or Trading Symbol LIVEPERSON INC [LPSN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
		<u></u>			. [X	Officer	r (give title		10% Ov Other (s				
(Last) (First) (Middle) C/O LIVEPERSON INC.,						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2019									X Officer (give title Officer Specify below) Chief Executive Officer							
475 TEN	TH AVEN	UE, 5TH FLOO	R																			
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK NY 10018															X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)												Person		e triari	гоне керо	rung			
		Tab	le I - No	n-Deriv	ativ	e Se	curit	ties Ac	quired	, Dis	posed c	of, or Be	nefici	ally	Owned							
1. Title of Security (Instr. 3) 2. Transport				Date	Transaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		i Disposed	ties Acquii I Of (D) (In	ed (A) or str. 3, 4 a	nd		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
					Code	v			Amount	(A) o	r Price)	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)							
Common	Common Stock			03/01	01/2019				М		25,00	0 A	\$1.	.79	375,533(1)			D				
Common	Common Stock			03/01	01/2019				F ⁽²⁾		10,57	2 D	\$28	3.35	364,961(1)			D				
Common Stock			03/01	/01/2019				D ⁽³⁾		14,42	8 D	\$28	3.35	350,	533 ⁽¹⁾ D		D					
Common Stock															4,22	6,983			By Ikon, LP			
		-	Table II -								osed of,				wned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transactior Code (Instr. 3)		n of l		6. Date I Expirati (Month/I	on Dat		7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		S	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	V (A	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er								
Stock Option (Right to	\$1.79	03/01/2019			М			25,000	(4)		03/05/2019	Common Stock	25,00	00	\$0	0		D				

Explanation of Responses:

- 1. Number reported includes 262,702 unvested restricted stock units granted to and held by the reporting person following the transactions reported by this filling.
- 2. The exercise price of the option and related tax withholding were satisfied by the Issuer's withholding shares otherwise deliverable upon exercise of the option.
- 3. These shares were repurchased by the Issuer. The repurchase price was the closing market price of the shares on the date of repurchase.
- 4. The option is fully vested and currently exercisable. If not exercised, the option would have expired on 03/05/2019.

Remarks:

/s/ Monica L. Greenberg, 03/05/2019 Attorney-in-Fact

** 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.