FORM 5

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP

OMB APPF	ROVAL							
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions F	eported.	FII6	or Section					ompany Ac									
1. Name and Address of Reporting Person* LOCASCIO ROBERT P				2. Issuer Name and Ticker or Trading Symbol LIVEPERSON INC [LPSN]								ck all app	,	J	X 10%	ó Owner		
(Last) (First) (Middle) C/O LIVEPERSON INC., 475 TENTH AVENUE, 5TH FLOOR				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2011						Year)	X Officer (give title Other (specify below) below) Chief Executive Officer							
(Street) NEW YORK NY 10018 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed	of, or	Benefici	ially	y Owne	ed				
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		ate, Transaction Code (Instr.						Securit Benefic		es		ership n: Direct	7. Nature of Indirect Beneficial Ownership	
								Amou	nt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)	
Common	Stock		12/30/2011		G		j	25	5,000	D	\$0		4,762,963			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp	r osed) r. 3, 4	Expiration (Month/D		te Exercisable and ration Date th/Day/Year) Expiration Date		e and int of ities ritying ative rity (Instr. 3) Amount or Number of Shares	De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	s Illy	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership	

Explanation of Responses:

/s/ Robert P. LoCascio

02/13/2012

** 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.