## FORM 4

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

Washington,	D.C.	20549

Check this box if no longer subject to	S
Section 16. Form 4 or Form 5	_
obligations may continue. See	
Instruction 1(b).	

## TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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

Name and Address of Reporting Person*     Block Peter					2. Issuer Name <b>and</b> Ticker or Trading Symbol LIVEPERSON INC [ LPSN ]											olicable)	g Person(s) to 10%	lssuer Owner	
(Last) (First) (Middle) C/O LIVEPERSON, INC., 475 TENTH AVENUE,						3. Date of Earliest Transaction (Month/Day/Year) 05/17/2011										Office below	er (give title v)	Othe belov	r (specify v)
STH FLOOR  (Street)  NEW YORK NY 10018				4. If	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							
(City)	(St	ate) (	Zip)																
		Tabl	e I - Nor	n-Deriva	ative	Sec	curitie	s Acq	juired,	Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) d Of (D) (Instr. 3, 4			4 and S		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)
Common Stock 05/17						7/2011					3,000	) A \$		\$10	.55	6,000		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)	Derivative Security  Date (Month/Day/Year)  Date (if any (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Note of Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Execution Dat		Date,	Transaction Code (Instr.		of Expirati		Expiratio	Date Exercisable and xpiration Date fonth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)		Date Exercisal		Expiration Date	Title	of	mber ares							

**Explanation of Responses:** 

/s/ Peter Block

04/25/2012

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).