FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
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0.5

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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).

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 7									
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol LIVEPERSON INC [LPSN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Carlough Daryl</u>					1=-	ETTEROOTTITO [EI SIT]										Direc	tor	10	% Owner	
(Last) (First) (Middle)						2 Date of Farlings Transportion (Month/Day/Year)								4		Officer (give title below)			ner (specify ow)	
(Last)	(I		3. Date of Earliest Transaction (Month/Day/Year)										SVP	Global &	Corp Con	roller				
C/O LIVEPERSON, INC.					09/	09/20/2017										U V 1,	, Global &	Corp Com	ronci	
475 TENTH AVENUE, 5TH FLOOR																				
4/3 ILIV	111 / 11 11	юц, этпт цоо			1 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								16	6. Individual or Joint/Group Filing (Check Applicable					
					- 4. "	4. II Amenument, Date of Original Filed (Month/Day/Year)									Line)					
(Street)															,	Form	filed by One	e Reporting F	erson	
NEW YO	ORK N	I Y	10018												2 \$,	, , ,		
					.										Form filed by More than One Reporting Person					
(City)	(9	State)	(Zip)													. 0.0.	···			
(City)	(,	olale)	(Ζιμ)																	
		Tab	le I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, o	r Ben	efici	ally O	wne	ed			
1. Title of S	Security (In:	str. 3)		2. Transa	action					3. 4. Securities Acquired (A)							ount of	6. Ownershi		
		•		Date (Month/D	au/Voo	Execution Dat			Transa Code (Disposed Of (D) (Instr. 3, 4			3, 4 an				Form: Direc (D) or Indire		
				(WOILLINE	ayrıca			lonth/Day/Year)		ııısıı.								(I) (Instr. 4)	Ownership	
						- 1					1		(4) ar		Repor				(Instr. 4)	
									Code	l۷	Amount	- [8	(A) or (D) Price			Transaction(s) (Instr. 3 and 4)				
0 0 1						2017		1 -		460(1)			410	705 1		F FC 4		_		
Common Stock 09/20/2				/2017	2017		S		462(1)) D \$13		\$13.	705 15,764		D					
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		10									osed of, onvertib					ileu				
1. Title of	2.	3. Transaction	3A. Deem	nod l	4.		5. Nu	mbor	6 Date I	Everci	cable and	7 T	itle and		8. Pric	o of	9. Number o	f 10.	11. Nature	
Derivative	Conversion or Exercise Price of Derivative		Execution			ransaction Code (Instr.		n of . Derivative		6. Date Exercisable and Expiration Date			Amount of		Derivative		derivative	Ownersi	ip of Indirect	
Security		(Month/Day/Year)	if any							Day/Y	ear)			Securities Underlying		ty	Securities	Form:	Beneficial	
(Instr. 3)			(Month/D	ay/rear)	8)		Securities Acquired						ivative	l	(Instr. 5)		Beneficially Owned	Direct (D		
Security						(A) or			Security (Instr					nstr. 3			Following	(I) (Instr.		
							Disposed of (D)		and 4)							Reported Transaction(s)	(s)			
						(Instr. 3, 4 and 5)										(Instr. 4)	5)			
				[An	nount						
											Expiration		or					- 1		
									Date				of	mber						
					Code	v	(A)	(D)	Exercisa	able	Date	Title	e Sh	ares						

Explanation of Responses:

1. Shares sold in order to cover the reporting person's tax liability incurred in connection with the vesting of the reporting person's restricted stock units on September 16, 2017.

Remarks:

/s/ Monica L. Greenberg, as attorney-in-fact

09/22/2017

** 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.