Edgar Filing: LIQUIDITY SERVICES INC - Form 4

LIQUIDITY Form 4 November 07		NC									
FORM									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANCE Washington, D.C. 20549					NGE	COMMISSION	OMB Number:	3235-0287			
Check this if no longe subject to Section 16	F CHANGES IN BENEFICIAL OWNERSHIP (SECURITIES						Expires: January 31 2009 Estimated average burden hours per				
Form 4 or Form 5 obligation may contin	Form 4 or Form 5 obligations may continue. See Instruction Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							response	•		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> CLOUGH PHILLIP A			2. Issuer Name and Ticker or Trading Symbol LIQUIDITY SERVICES INC [LQDT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			3. Date of Earliest Transaction (Month/Day/Year) 11/05/2008					X_ Director 10% Owner Officer (give title Other (specify below)			
			endment, Date Original nth/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 				
BALTIMOR	E, MD 21202	2-3116						Person		eporung	
(City)	(State)	(Zip)	Table	I - Non-I	Derivative	Secur	ities Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)		Yransaction Date 2A. Deemed both/Day/Year) Execution Date, if any (Month/Day/Year)			4. Secu ionAcquiro Disposo (Instr. 3	ed (A) of ed of (I , 4 and (A) or	D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/05/2008			A	2,917	A	\$ 0	2,917	D		

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

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 control number.

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	. Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option	\$ 12.89					<u>(1)</u>	04/03/2016	Common Stock	20,000	
Employee Stock Option	\$ 14.75					(2)	10/02/2016	Common Stock	9,393	
Employee Stock Option	\$ 11.19					(3)	10/01/2017	Common Stock	8,560	
Employee Stock Option	\$ 11.66					(4)	06/03/2018	Common Stock	2,573	
Employee Stock Option	\$ 11.66					(5)	06/03/2018	Common Stock	15,082	

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CLOUGH PHILLIP A 400 EAST PRATT STREET, SUITE 910 BALTIMORE, MD 21202-3116	Х					
Signatures						
/s/ James E. Williams, by power of attorney	11	/07/2008				
**Signature of Reporting Person		Date				
Evaluation of Decause	~~!					

Explanation of Responses:

- * 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).
- (1) These options became fully vested on April 3, 2008.

Reporting Owners

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- (2) These options became fully vested on October 2, 2007
- (3) These options became fully vested on October 1, 2008
- (4) These restricted shares vest on April 29, 2009.
- (5) These options vest on April 29, 2009.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.