FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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. Name and Address of Reporting Person* Mateus-Tique Jaime						2. Issuer Name and Ticker or Trading Symbol LIQUIDITY SERVICES INC [LQDT]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Offices (six title Check and six title Check					
(Last) (First) (Middle) C/O LIQUIDITY SERVICES, INC.							Earlie	est Trar	nsaction	(Mon	th/Day/Year)		Officer (give title Other (specify below) below)						
1920 L S	4. If	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable									
(Street) WASHINGTON DC 20036					_								Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																			
		Tab	le I - N	on-Deriv	ative	Sec	uriti	es A	quire	d, D	isposed	of, or Be	eneficia	Ily Owne	d				
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da		Year) Exe		A. Deemed kecution Date, any lonth/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount Securities Beneficial Owned Fo	ly	Form: (D) or I		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 ar				(Instr. 4)	
Common	Stock			01/05/2010				S ⁽¹⁾		14,000	D	\$10.14	2,011,345		D				
Common	Stock			01/06/2	2010	010			S ⁽¹⁾		14,000	D	\$10.2	1,997	,345	345 D			
Common	Stock			01/07/2	01/07/2010				S ⁽¹⁾		14,000	D	\$10.2	1,983	1,983,345)		
Common Stock												359,000		I		By the Em El 2007 Irrevocable Trust			
Common Stock														257,	311	·	I	By the Jaime Mateus- Tique 2005 Qualified Grantor Retained Annuity Trust	
Common Stock													30,400		I		By the Mateus- Tique Foundation		
		Т	able II								posed of			y Owned		•		<u> </u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactio Code (Insti		5. Number tion of		S, Options, conver 6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option	\$12.02								(2)		10/01/2017	Common Stock	76,000		76,0	000	D		
Employee Stock Option	\$17.63								(3)		09/21/2016	Common Stock	75,000		75,0	000	D		
Employee Stock Option	\$7								(4)		12/21/2015	Common Stock	30,000		30,000		D		

Explanation of Responses:

- 1. The transactions in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 12, 2006.
- 2. Twenty-five percent of this option grant vested on October 1, 2008 and thereafter 1/48th of the option grant will vest each month for thirty-six months.

- 3. Twenty-five percent of this option grant vested on September 21, 2007 and thereafter 1/48th of the option grant will vest each month for thirty-six months.
- 4. This option became fully vested on April 19, 2006.

/s/ James E. Williams, by power of attorney

** Signature of Reporting Person Date

01/07/2010

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.