FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average b	ourden									
houre per recognese:	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* Williams James Edwin						2. Issuer Name and Ticker or Trading Symbol LIQUIDITY SERVICES INC [LQDT]									ck all applic	ctor		10% Ov	ner	
_	D LIQUIDITY SERVICES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/29/2008								- ·	Officer (give title below) VP, Cen.Counsel & Secretary				еспу	
	020 L STREET, N.W., 6TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WASHINGTON DC 20036					_							X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(5	State)	(Zip)																	
		Tab	ole I - Nor	n-Deri	vativ	e Se	ecurities	s Ac	quired,	Disp	osed o	f, or B	enef	icially	/ Owned					
Date				Date	n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					s ally following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		Price	Reported Transact (Instr. 3 a	ion(s)				
Common Stock															7	00		D		
			Table II -						uired, D						Owned					
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nu of	nount mber ares						
Employee Stock Option	\$7								(1)	1	2/22/2015	Commo Stock	¹ 18	,334		18,33	4	D		
Employee Stock Option	\$12.89								(2)	0	3/30/2018	Commo Stock	30	,000		30,00	0	D		
Employee Stock Option	\$10.93								(3)	1	0/01/2017	Commo Stock	30	,000		30,00	0	D		
Employee Stock	\$7.48	12/29/2008			Α		27.000		(4)	1	0/01/2018	Commo	n 27	,000	\$0	27.00	0	D		

Explanation of Responses:

- 1. One-quarter of this option grant vested on November 11, 2006, with the remaining options vesting at 2.083% per month thereafter on the first day of each month for the next 36 months.
- 2. One-quarter of this option grant vested on March 30, 2007, with the remaining options vesting at 2.083% per month thereafter on the first day of each month for the next 36 months.
- 3. One-quarter of this option grant vested on October 1, 2008, with the remaining options vesting at 2.083% per month thereafter on the first day of each month for the next 36 months.
- 4. Twenty-five percent of this option grant will vest on October 1, 2009, and thereafter 1/48th of the option grant will vest each month for thirty-six months.

12/31/2008 /s/ James E. Williams

** 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.