Instruction 1(b)

## FORM 5

Form 3 Holdings Reported

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Washington, D	.C. 20549
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362 Estimated average burden hours per response: 1.0

OMB ADDROVAL

## **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Form 4	1 Transactions	Reported.	Fil	led pursuant t or Sectio					urities Excha Company Ad		of 1934							
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol LIQUIDITY SERVICES INC [ LQDT ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify					Owner		
(Last) (First) (Middle) C/O LIQUIDITY SERVICES, INC. 1920 L STREET, N.W., 6TH FLOOR					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 09/30/2007								X Officer (give title Officer (specify below) CFO, Treasurer					
(Street) WASHINGTON DC 20036  (City) (State) (Zip)				4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (C Line)  X Form filed by One Reportin Form filed by More than Or Person								porting Pe	erson				
		Tab	le I - Non-Deri	vative Sec	curiti	es A	cquire	d, D	isposed	of, or E	Benefici	ally	Owne	d				
Date		2. Transaction Date (Month/Day/Year)	Execution I	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			Securitie Beneficia		s	6. Owne Form: (D) or	rship : Direct	7. Nature of ndirect Beneficial Ownership		
				(WOIIII/Day	, rear	0,	6)		ount	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock 03			03/15/2007				G		5,000	D	\$0		23,624		D			
		Т	able II - Deriva (e.g., p	ative Secu outs, calls			•		•	•		-	wned					
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. Transaction Code (Instr. 8)  5. Number of Expiration Date (Month/Day/Year)  5. Number of Expiration Date (Month/Day/Year)  6. Date Exercisable and Expiration Date (Month/Day/Year)  6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title ar Amount of Securities Underlyin Derivative (Instr. 3 a and 5)		of es ing /e Security	De Se	Price of erivative ecurity estr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)						
					(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							
Employee Stock Option	<b>\$</b> 7						(1)		10/28/2015	Common Stock	67,500			67,50	00	D		
Employee Stock Option	\$2						(2)		02/24/2015	Commor Stock	59,917			59,91	17	D		
Employee Stock	\$12.89						(3)		03/30/2016	Common	19,376			19,37	<sub>76</sub>	D		

## **Explanation of Responses:**

Option

- 1. On October 28, 2005, the reporting person was granted an option to purchase 75,000 shares of common stock. On February 28, 2006, the option vested as to 10% (7,500 shares) upon the completion of the Company's initial public offering; the remaining 90% (67,500 shares) shall vest upon the delivery by the Company's independent accountants of an unqualified opinion on management's assessment of the Company's internal control over financial reporting in accordance with Section 404 of the Sarbanes-Oxley Act.
- 2. The option vested as to 25% on February 25, 2005 and has vested, and will continue to vest, at 2.083% per month thereafter on the 25th of each month for the 36 months following the month of grant.
- 3. One-quarter of the options vested on March 30, 2007, with the remaining options vesting in monthly installments through March 30, 2010.

/s/ James E. Williams, by 11/14/2007 power of attorney

\*\* Signature of Reporting Person Date

Stock

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.