FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden						
ours per respon	se 0.5					

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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)										41 00			
1. Name and Address of Reporting Person * Capo Brian (Last) (First) (Middle) C/O LIVE NATION ENTERTAINMENT, INC., 9348 CIVIC CENTER DRIVE			2. Issuer Name and Ticker or Trading Symbol Live Nation Entertainment, Inc. [LYV]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director N Officer (give title below) Other (specify below) Chief Accounting Officer					
			3. Date of Earliest Transaction (Month/Day/Year) 01/26/2011												
(Street) BEVERLY HILLS, CA 90210			4. If Amendment, Date Original Filed(Month/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 Person						
(City		(State)	(Zip)		Tal	ole I - No	on-Dei	rivative S	Securities	s Acquir	ed, Disp	osed of, or	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed 3. Tran Execution Date, if Code		ansaction 4. Securities Acquired (A) or Disposed of			equired 5 1 1 5)	5. Amour Beneficia	nt of Securit ally Owned I Transaction	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	e V	Amou	(A) or (D)	Price				(I) (Instr. 4)	
Common	Stock		01/26/2011			F		992	D	\$ 10.7	14,008			D	
Reminder: indirectly.	Report on a	separate line fo	or each class of secu	rities bene	ficially o	owned di	irectly	or							
							cor	tained i	n this fo	orm are	not rec	uired to re	nformation espond unl ntrol numb	ess	EC 1474 (9- 02)
			Table II - D	Derivative 2.g., puts, o							ly Owned	i			
Security or Exercise (Month/Day/Year) any		ate, if Code Deri (Year) (Instr. 8) Secu Acqu (A) O Disp of (I (Instr. 8) (Instr. 8) (Instr. 8)			rities nired or osed D) r. 3,		Amo Unde Secu	tle and unt of erlying rities r. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivating Security Direct (I or Indire	Ownershi (Instr. 4) O)			
				Co	de V	(A) (I	Da Ex	te ercisable	Expiration Date	on Title	Amount or Number of Shares				
Repor	ting O	wners													
						R	elation	ıships							
Reporting Owner Name / Address			Director	10% O	wner C	Officer			О	ther					
Capo Brian C/O LIVE NATION ENTERTAINMENT, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210					(Chief	Accoun	ting Off	ficer						
Signat	tures														

Explanation of Responses:

Kathy Willard, Attorney-in-Fact for Brian Capo

**Signature of Reporting Person

- * 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).

01/27/2011

Date

(1) Represents shares withheld for tax purposes upon vesting of restricted stock grants.

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 nu	mber.