FORM 4

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

| OMB APPROVAL | | | | | |
|------------------|-----------|--|--|--|--|
| DMB Number: | 3235-0287 | | | | |
| Estimated averag | ge burden | | | | |
| nours 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

| | pe Response | | | | | | | | | | | 5 D 1 .: | 1: CD | .: D | () , T | |
|--|---|----------------|--|--|---|---------------------|----------------------|--|--|---|--|------------------------------|---|---|--|---|
| Name and Address of Reporting Person Willard Elizabeth Kathleen | | | | 2. Issuer Name and Ticker or Trading Symbol Live Nation Entertainment, Inc. [LYV] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| C/O LIVI | (Last) (First) (Middle) C/O LIVE NATION ENTERTAINMENT, NC., 9348 CIVIC CENTER DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2016 | | | | | | Director 10% Owner X Officer (give title below) Other (specify below) EVP & Chief Financial Officer | | | | | |
| BEVERI | (Street) 4 BEVERLY HILLS, CA 90210 | | | | | | | | | | 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 | y) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | 1 | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | f Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Beneficial | t of Securities lly Owned Following Transaction(s) nd 4) | | Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | Co | de | V | Amoun | (A) or (D) | Price | | | | (I) (Instr. 4) | (111541. 1) |
| Common | Stock | | 01/15/2016 | | | F | ; | | 3,245 (1) | D | \$ 22.5 | 255,724 | | | D | |
| | | | | | | | uired | l, Dis | posed o | f, or Bei | neficia | lly Owned | | ntrol numb | er. | |
| 1. Title of 2. Derivative Conversion or Exerc (Instr. 3) Price of Derivativ Security | | | 3A. Deemed Execution Da ear) any | e.g., puts, calls, warrants, 4. 5. Num Code Derivat Year) (Instr. 8) Securit: Acquire (A) or Dispose of (D) | | | tive ties red | and Expiration Date (Month/Day/Year) An Un See (In 4) | | | 7. T Am Und Sect (Ins | Title and 8. Price of | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s | Ownership Form of Derivative Security: Direct (D) or Indirect | Beneficia Ownersh (Instr. 4) |
| | | | | | | (Instr. 3 4, and | | | | | | | | (Instr. 4) | (Instr. 4) | |
| | | | | ~ | 1 7 | | | Date Exerc | | Expiratio Date | n Title | Amount or Number of | | | | |
| Repor | rting O | Owners | | Co | ode V | (A) (| | | | | n Title | or e Number | | | | |
| • | | Owner Name / A | Address | Сс | ode V | (A) (| (D) | Exerc | | | Title | or Number of | | | | |

EVP & Chief Financial Officer

Signatures

9348 CIVIC CENTER DRIVE

BEVERLY HILLS, CA 90210

| Kathy Willard | 01/20/2016 |
|------------------------|------------|
| Signature of Reporting | Date |

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) 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. |
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