## FORM 4

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

| OMB APPR           | OVAL     |   |
|--------------------|----------|---|
| OMB Number:        | 3235-028 | 7 |
| Estimated average  | burden   |   |
| nours per response | e 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      | es)                               |  |  |                              |  |  |  |  |  |  |           |  |  |
|---|------------------|-----------------------------------|--|--|------------------------------|--|--|--|--|--|--|-----------|--|--|
| Name and Address of Reporting Person *  Dolgen Jonathan L |                  |                                   | 2. Issuer Name and Ticker or Trading Symbol<br>Live Nation Entertainment, Inc. [LYV] |  |                              |  |  |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner |  |  |           |  |  |
|   | E NATION         | (First)<br>N ENTERTA<br>CENTER DI |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/14/2016                      |                              |  |  |  | r (give title belo   | w)   | Other (specify b                         | pelow)    |  |  |
| (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)  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                              |  |  |  |  |  |  |           |  |  |
| 1.Title of Security (Instr. 3)                            |                  | D                                 | 2. Transaction<br>Date<br>(Month/Day/Year)   |  | Code<br>(Instr. 8)           |  | 4. Securities Acquired<br>(A) or Disposed of (D<br>(Instr. 3, 4 and 5) |  | of (D)   | (D) Beneficially Owned Followin<br>Reported Transaction(s)<br>(Instr. 3 and 4)   |  | Following | 6.<br>Ownership<br>Form:                                     | Beneficial   |
|   |                  |                                   |  | (Month/Day/Year  |                              |  | V Amount (D) Pr  |  | Price  |  |  |           | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4)               | Ownership<br>(Instr. 4)  |
| Common  | Stock            |                                   | 06/14/2016   |  | A                            |  | 6,337  | A  | \$ 0<br>(1) (2)  | 96,699   | 3)                                       |           | D  |  |
|   | Report on a      | separate line f                   | for each class of secu   | urities beneficially   | owned d                      | irectly  | or   |  |  |  |  |           |  |  |
| Reminder: indirectly.                                     | Report on a      | separate line f                   | for each class of secu   | urities beneficially   | owned d                      | Pe   | rsons wl<br>ntained i  | in this fo   | orm ar   | e not req  | ection of in<br>uired to re<br>d OMB cor | spond un  | less   | EC 1474 (9-<br>02)   |
|   | Report on a      | separate line f                   | Table II - I   | Derivative Securiti  | es Acqu                      | Per<br>cou<br>the  | rsons wl<br>ntained i<br>form di<br>Disposed                           | in this fo<br>splays a<br>of, or Be  | orm ar<br>a curre<br>neficia   | e not required to the second s | uired to re                              | spond un  | less   |  |
| 1. Title of   | 2.<br>Conversion | 3. Transactio                     | Table II - I  on 3A. Deemed Execution Da  (Year) any                                 |  | es Acqu<br>rrants,<br>5. Num | Per continue the c | rsons wl<br>ntained i<br>form di<br>Disposed                           | in this for splays a of, or Be reisable ion Date   | orm ar<br>a curre<br>eneficia<br>urities)<br>7. T<br>Am<br>Uno<br>Sec                        | e not required to the second s | uired to red OMB cor                     | spond un  | of 10. Owners Form of y Derivati Security Direct ( or Indire | 11. Natur<br>of Indirect<br>Beneficia<br>Ownersh<br>(Instr. 4) |

### **Reporting Owners**

| Describer Occurs Name / Address  | Relationships |           |         |       |  |  |
|--|---------------|-----------|---------|-------|--|--|
| Reporting Owner Name / Address   | Director      | 10% Owner | Officer | Other |  |  |
| Dolgen Jonathan L<br>C/O LIVE NATION ENTERTAINMENT, INC.<br>9348 CIVIC CENTER DRIVE<br>BEVERLY HILLS, CA 90210 | X             |           |         |       |  |  |

## **Signatures**

| Kathy Willard, Attorney-in-Fact for Jonathan L Dolgen | 06/15/2016 |
|---|------------|
| **Signature of Reporting Person                       | 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) Reporting person received the award under the Amended and Restated Ticketmaster Entertainment, Inc. 2008 Stock and Annual Incentive Plan.
- (2) Represents a restricted stock award. These shares will vest in full on June 14, 2017.
- Includes 137 shares of common stock held by a family charitable foundation with which Mr. Dolgen is affiliated. Mr. Dolgen disclaims beneficial ownership of these (3) shares.

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 number.