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

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

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#### 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 Type Responses)										
1. Name and Address of Reporting Pe Rapino Michael	erson <del>*</del>	2. Issuer Name a Live Nation, Inc		or Tr	ading Syr	nbol		5. Relationship of Reporting Perso (Check all appli X Director		er
(Last) (First) C/O LIVE NATION, INC., 934 CENTER DRIVE	(Middle) 8 CIVIC	3. Date of Earliest 08/10/2009	Transactio	n (M	onth/Day	/Year)		X Officer (give title below) President & C	Other (specify b CEO	elow)
(Street) BEVERLY HILLS, CA 90210		4. If Amendment, 1	Date Origin	nal F	iled(Month	/Day/Yea	ır)	6. Individual or Joint/Group Filin, _X_Form filed by One Reporting Person Form filed by More than One Reporting		ıble Line)
(City) (State)	(Zip)	Tab	le I - Non-	Deri	vative Se	curitie	s Acqui	red, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	tion		isposed	f of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership
		()	Code	v	Amount	(A) or (D)	Price	(	or Indirect (I) (Instr. 4)	· ·
Common Stock	08/10/2009		Р		8,200	А	\$ 6.07 <u>(1)</u>	766,438	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)																
1. Titl	le of	2.	3. Transaction	3A. Deemed	4.		5. Nu	mber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Deriv	ative	Conversion	Date	Execution Date, if	Transact	ion	of		and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Secur	rity	or Exercise	(Month/Day/Year)	any	Code		Deriv	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr.	: 3)	Price of		(Month/Day/Year)	(Instr. 8)		Secur	rities			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
		Derivative					Acqu	ired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
		Security					(A) o	r			4)			0	Direct (D)	
							Dispo	osed						Reported	or Indirect	
							of (D	· · · · · · · · · · · · · · · · · · ·						Transaction(s)	< /	
							(Instr							(Instr. 4)	(Instr. 4)	
							4, and	15)								
												Amount				
									Date	Evaluation		or				
									Exercisable	Expiration Date	Title	Number				
									Literensuore	Date		of				
					Code	V	(A)	(D)				Shares				

## **Reporting Owners**

Dementing Owney Name ( Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Rapino Michael C/O LIVE NATION, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210	х		President & CEO					

### **Signatures**

Kathy Willard, Attorney-in-Fact for Michael Rapino 08/10/2009 Date \*\*Signature of Reporting Person

# **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).

This transaction was executed in multiple trades at prices ranging from \$6.07 to \$6.10. The price reported above reflects the weighted average purchase price. The (1) reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was affected.

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.