## FORM 4

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

OMB APPRO\	/AL					
OMB Number:	3235-0287					
Estimated average burden						
hours per response	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 Type Responses)  1. Name and Address of Reporting Person * Willard Elizabeth Kathleen					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
C/O LIV	st) E NATION	Live Nation Entertainment, Inc. [LYV]  3. Date of Earliest Transaction (Month/Day/Year) 01/15/2014								Director 10% Owner  X Officer (give title below) Other (specify below)  EVP & Chief Financial Officer						
INC., 9348 CIVIC CENTER DRIVE  (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				
(Ci		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea			Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		d of (D) 5)	uired 5. Amount of So Owned Followi Transaction(s)		l C	wnership orm:	7. Nature of Indirect Beneficial	
				(Month/Da		ay/Year)	Co	ode V	Amoi	(A) o		(Instr. 3 and 4)		Direct (Dor Indirect (I) (Instr. 4)		Ownership (Instr. 4)
Common Stock 01/15/2014					1	A	25,000	000 A	\$ 0 (1) (2)	325,301		D	,			
	report on u	opulate interior tax	th class of securities  Table II	- Deriva	ative !	Securitie	s Acc	Pers in th disp quired, D	ons w is forr lays a sposed	n are no currentl of, or Be	t required y valid Ol neficially (	e collection o d to respond u MB control nu Owned	ınless the		d SEC 1	474 (9-02)
	Conversion	sion Date Cise (Month/Day/Year) ive	3A. Deemed Execution Date, if	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		· •	xercisa n Date	ble and	7. Title an	ng Securities De Securities Securities		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect	) ` ´
				Code	V	(A)	(D)	Date Exercisa		oiration e	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (buy)	\$ 20.90	01/15/2014		A		300,000	)	(3)	01/	15/2024	Common	n 300,000.00	<u>(1)</u>	300,000	D	

### **Reporting Owners**

Port and the Common Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Willard Elizabeth Kathleen C/O LIVE NATION ENTERTAINMENT, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210			EVP & Chief Financial Officer					

### **Signatures**

Kathy Willard	01/17/2014
Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person,  $\emph{see}$  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 Live Nation Entertainment, Inc. 2005 Stock Incentive Plan, as amended and restated as of April 15, 2011.
- (2) Represents a restricted stock award. These shares will vest in four equal annual installments on the first, second, third and fourth anniversaries of the grant date.

  (3) Only vested shares may be exercised. These options will vest in four equal annual installments on the first, second, third and fourth anniversaries of the grant date.

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.