FORM	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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response...

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

1. Name and Address of Capo Brian	2. Issuer Name an Live Nation Ente			•••	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
C/O LIVE NATION INC., 9348 CIVIC C		MENT,	3. Date of Earliest Transaction (Month/Day/Year) 06/10/2015						X Officer (give title below) Other (specify below) Chief Accounting Officer Officer			
BEVERLY HILLS, (4. If Amendment, D	ate Origina	l File	d(Month/Da	ıy/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									
(Instr. 3)		2. Transaction Date (Month/Day/Year)		3. Transact Code (Instr. 8)	tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Transaction(s)	Ownership Form: Deneficia	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		06/10/2015		М		7,500	A	\$ 11.17	11,591	D		
Common Stock		06/10/2015		S		7,500	D	\$ 28.95	4,091	D		

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

Persons who respond to the collection of information

SEC 1474 (9-02)

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. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber	6. Date Exer	cisable and	7. Title and	l Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	n of E		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivative (Month/Day/Year)		Securities Securities		Security	Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)			Securities		(Instr. 3 and 4) (Instr. 3		· /	Beneficially		Ownership	
	Derivative						uired							Security:	(Instr. 4)
	Security					(A)							Following	Direct (D)	
							posed						1	or Indirect	
						of (l	-						Transaction(s) (Instr. 4)	2.2	
						and	tr. 3, 4,						(Instr. 4)	(Instr. 4)	
						and	5)								
								Dete	E		Amount				
								Date Exercisable	Expiration	Title	or Number				
				Code	v	(A)		Exercisable	Date		of Shares				
Stock				2 Sub		(-1)	(2)								
	\$ 11.17	06/10/2015		М			7 500	(1)	03/13/2018	Common	7,500.00	\$ 0	7 500	D	
Option	\$ 11.17	00/10/2015		IVI			7,500	11	03/13/2018	Stock	7,500.00	\$0	7,500	D	
(buy)															

Reporting Owners

Dementing Operation Name (Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Capo Brian C/O LIVE NATION ENTERTAINMENT, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210			Chief Accounting Officer				

Signatures

Brian Capo	06/11/2015
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) Only vested shares may be exercised. As of the date of this report 7,500 shares are vested and exercisable.

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.