FORM	4
------	---

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

(Deint on True D

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

(Print or Type Responses)	i									
1. Name and Address of Reporting Person Capo Brian	2. Issuer Name and Ticker or Trading Symbol Live Nation Entertainment, Inc. [LYV]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director			
(Last) (First) C/O LIVE NATION ENTERTAINN INC., 9348 CIVIC CENTER DRIVE	3. Date of Earliest Transaction (Month/Day/Year) 09/08/2017						X_Officer (give title below)			
(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								
(Instr. 3)	2. Transaction 2A. Deemed 3. Transaction 4. Securities Acquire Date Execution Date, if Code (A) or Disposed of ((Instr. 8) (Instr. 3, 4 and 5)		of (D)	Transaction(s)	Ownership Form:	 Nature of Indirect 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	09/08/2017		М		7,500	А	\$ 11.17	13,354	D	
Common Stock (1)	09/08/2017		S		7,500		\$ 40.5	5,854	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 contained in this form are not required to respond unless the form displays a currently valid OMB control number. SEC 1474 (9-02)

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

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title o	f 2.	3. Transaction	3A. Deemed	4.	5. Number		6. Date Exercisable and		7. Title and Amount		8. Price of	9. Number of	10.	11. Nature	
Derivati	ve Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivative (Month		(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Secu	Securities		(Instr. 3 and 4) (Instr. 5)		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Acq	equired					Owned	Security:	(Instr. 4)	
	Security					(A)	or					Following	Direct (D)		
						Disp	isposed					Reported	or Indirect		
						of (D)					Transaction(s)	(I)			
						(Instr. 3, 4,						(Instr. 4)	(Instr. 4)		
						and	and 5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
				Code	v	(A)	(D)				of Shares				
Stock										C					
Option	\$ 11.17	09/08/2017		М			7,500	(1)	03/13/2018	Common Stock	7,500,00	\$ 0	0	D	
(buy)	<i>÷</i> = 111 <i>7</i>						.,			Stock	.,	÷Ŭ	2		

Reporting Owners

Dementing Opener 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	09/12/2017
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 transaction date, 7,500 shares were vested and exercisable and were due to expire in March 2018.

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.