## Edgar Filing: Capo Brian - Form 4

Capo Brian Form 4 March 19, 24 <b>FORN</b> Check th if no long subject to Section 1 Form 4 co Form 5 obligation may com <i>See</i> Instr 1(b).	<b>14</b> UNITED is box ger 56. 66. or 57 57 57 57 57 57 57 57 57 57 57 57 57	<b>IENT O</b> resuant to S a) of the 3	Was F CHAN Section 1 Public U	Shington, GES IN SECUR 6(a) of the	D.C. 20 BENEF ITIES e Securit ling Con	549 ICIA ies E npany	L OW Exchange y Act of	COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 0	OMB Number: Expires: Estimated a burden hou response		
(Print or Type Responses)											
1. Name and Address of Reporting Person <u>*</u> Capo Brian			2. Issuer Name <b>and</b> Ticker or Trading Symbol Live Nation Entertainment, Inc. [LYV]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(				3. Date of Earliest Transaction (Month/Day/Year) 03/16/2019				Director 10% Owner X Officer (give title Other (specify below) Chief Accounting Officer			
				nendment, Date Original onth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/16/2019			F	183 <u>(1)</u>	D	\$ 63.46	8,358	D		
Common Stock	03/19/2019			F	88 <u>(1)</u>	D	\$ 62.64	8,270	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.

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

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	ate Amount of		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address				Relationships			
<b>F O O O O O O O O O O</b>	Director	10% Owner	Officer	Other			
Capo Brian C/O LIVE NATION ENTE 9348 CIVIC CENTER DRI BEVERLY HILLS, CA 902			Chief Accounting Officer				
Signatures							
Brian Capo	03/19/2019						

\*\*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) Represents shares withheld for tax purposes upon vesting of restricted stock grants.

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.