LIVE VENTURES Inc

Form 4

January 20, 2017

FORM 4

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

OMB 3235-0287 Number:

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

burden hours per

1(b).

(Print or Type Responses)

1. Name and Add Gao Dennis	ress of Report	ing Person *	2. Issuer Name and Ticker or Trading Symbol LIVE VENTURES Inc [LIVE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction	(eneck all applicable)				
			(Month/Day/Year)	X Director 10% Owner				
325 E. WARM SPRINGS ROAD, SUITE 102			01/19/2017	Officer (give title Other (specify below)				
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person				
LAS VEGAS NV 89119				Form filed by More than One Reporting				

Person

LAS VEGAS, NV 89119

(Cit	y) (State)	(Zip) Tal	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	(Month/Day/Ye	Date 2A. Deemed ar) Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transactiomr Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V	Amount		Price	(Instr. 3 and 4)					
Commo Stock	on 01/19/2017		P	21	A	\$ 19.85	21	D				
Commo Stock	on 01/19/2017		P	1,100	A	\$ 19.8139	1,121	D				
Commo Stock	on 01/19/2017		P	200	A	\$ 19.8039	1,321	D				
Commo Stock	on 01/19/2017		P	100	A	\$ 19.7789	1,421	D				
Commo Stock	on 01/19/2017		P	100	A	\$ 19.7639	1,521	D				

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Common Stock	01/19/2017	P	300	A	\$ 19.7939	1,821	D
Common Stock	01/19/2017	P	100	A	\$ 19.5857	1,921	D
Common Stock	01/19/2017	P	2,000	A	\$ 19.28	3,921	D
Common Stock	01/19/2017	P	2,000	A	\$ 19.3902	5,921	D
Common Stock	01/19/2017	P	100	A	\$ 19.4515	6,021	D
Common Stock	01/19/2017	P	100	A	\$ 19.4533	6,121	D
Common Stock	01/19/2017	P	100	A	\$ 19.4738	6,221	D
Common Stock	01/19/2017	P	100	A	\$ 19.49	6,321	D
Common Stock	01/19/2017	P	400	A	\$ 19.5421	6,721	D
Common Stock	01/19/2017	P	3,000	A	\$ 19.51	9,721	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	of Expiration (Month/I			7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Gao Dennis

325 E. WARM SPRINGS ROAD, SUITE 102 X

LAS VEGAS, NV 89119

Signatures

/s/ Dennis Gao 01/19/2017

**Signature of Date 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).

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.

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