Willard Elizabeth Kathleen Form 4

October 05, 2007

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

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, Section 17(a) of the Public Utility Holding Company Act of 1935 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

(Middle)

(Zip)

(First)

C/O LIVE NATION, INC., 9348 CIVIC CENTER DRIVE

(Street)

(State)

10/03/2007

2. Issuer Name and Ticker or Trading

Live Nation, Inc. [LYV]

(Month/Day/Year)

4. If Amendment, Date Original

Filed(Month/Day/Year)

**OMB APPROVAL** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

10% Owner

6. Ownership 7. Nature of

Beneficial

Ownership

(Instr. 4)

(9-02)

Form: Direct Indirect

Other (specify

(Last)

(City)

Common

Stock

Symbol

3. Date of Earliest Transaction

10/03/2007

6. Individual or Joint/Group Filing(Check

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(D) or

Indirect (I)

(Instr. 4)

5. Relationship of Reporting Person(s) to

(Check all applicable)

**EVP & Chief Financial Officer** 

Person

Issuer

below)

Director

X\_ Officer (give title

BEVERLY HILLS, CA 90210

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

Transaction(A) or Disposed of Code (Instr. 8)

3.

(D) (Instr. 3, 4 and 5)

(A)

4. Securities Acquired

Reported Transaction(s) (Instr. 3 and 4)

5. Amount of

Beneficially

Securities

Owned Following

Amount (D) Price P 60,000 60,134

D

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

### Edgar Filing: Willard Elizabeth Kathleen - Form 4

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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (buy)	\$ 22.5	10/03/2007		A	20,000	<u>(1)</u>	10/03/2017	Common Stock	20,000

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Willard Elizabeth Kathleen C/O LIVE NATION, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210

**EVP & Chief Financial Officer** 

## **Signatures**

Kathy Willard 10/05/2007

\*\*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. These options will vest in four equal annual installments on the first, second, third, and fourth anniversaries of the grant date.
- (2) Reporting person received the award under the Live Nation, Inc. 2005 Stock Incentive Plan.
- (3) 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.

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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