# FORM 4

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

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

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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)													
1. Name and Address of Reporting Person * Isaac Jon				2. Issuer Name and Ticker or Trading Symbol LIVE VENTURES Inc [LIVE]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director X_ Officer (give title below) Other (specify below)  CEO, CFO and President					
(Last) (First) (Middle) C/O LIVE VENTURES, INC., 325 EAST WARM SPRINGS ROA				3. Date of Earliest Transaction (Month/Day/Year) 04/07/2016											
(Street) LAS VEGAS, NV 89119				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)	_											
		· · ·											Beneficially		
1.Title of Security (Instr. 3)		Da	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	if (	Code (Instr. 8)		on 4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)			Following	6. Ownership Form:	Beneficial
					ar)	Code	v	Amoun	(A) or (D)	Price	(Instr. 3 a	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common \$0.001 pe	Stock, par r share	value	04/07/2016			P		333	A	\$ 1.549	8,318,57	78		D	
Common Stock, par value \$0.001 per share 04/07/201		04/07/2016			P		8,300	1 1	\$ 1.58	8,326,87	78		D		
Reminder: I	Report on a	separate line fo	or each class of secu	urities beneficiall	y ow	ned dire	ctly o	or							
·			Persons who respond to the collection of information contained in this form are not required to respond unline form displays a currently valid OMB control number						ess	EC 1474 (9- 02)					
				Derivative Secur e.g., puts, calls, v								l			
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/\(^	ear) any			•	and Expira e (Month/Da		e Exercisable xpiration Date h/Day/Year)		Citle and count of derlying urities str. 3 and	to of ying ies 3 and Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivati Security Direct (l or Indire	ve Ownership (Instr. 4)
				Code V	V (.	A) (D)	Date Exe	e rcisable	Expiration Date	on Titl	or Number of Shares				

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Isaac Jon C/O LIVE VENTURES, INC. 325 EAST WARM SPRINGS ROA LAS VEGAS, NV 89119	X	X	CEO, CFO and President				

#### **Signatures**

/s/ Jon Isaac	04/07/2016
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).

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 nu	mber.