FORM 4

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

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

OMB APPROVAL						
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Section 16. Form 4 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF or Form 5 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 Person – Huber Joe	2. Issuer Name and Ticker or Trading Symbol LIVEDEAL INC [LIVE]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 10940 WILS 925	3. Date of Earliest Transaction (Month/Day/Year) 11/18/2008						Director _X_10% Owner Officer (give title Other (specify below) below)				
LOS ANGEI	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)							ies Ac Own	cquired, Disposed of, or Beneficially ned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any	on Date, if	e, if Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(l) (Instr. 4)	(1150.4)
Common Stock	11/18/2008			Ρ		97	A	\$ 1.61	1,606,489	D	
Common Stock	11/18/2008					196	A	\$ 1.64	1,606,685	D	
Common Stock	11/18/2008			Ρ		1,500	A	\$ 1.65	1,608,185	D	
Common Stock	11/18/2008			Ρ		12,950	А	\$ 1.75	1,621,135	D (1)	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on	Num	ber	and Expiration	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/	Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secu	urities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu	rities			(Instr	r. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o								or Indirect	
						Dispo							Transaction(s)	(I)	
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr									
						4, an	d 5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								LACIOISADIC	Duit		ot				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Departing Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Huber Joe 10940 WILSHIRE BLVD., SUITE 925 LOS ANGELES, CA 90024		х					

Signatures

/s/ Joseph R. Huber	11/20/2008
-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).
- The Reporting Person also indirectly owns 35,774 shares, of which 4,700 shares are beneficially owned by the Reporting
- Person's spouse; and 25,513 shares are beneficially owned by the Reporting Person as the portfolio manager of an investment company for which the Reporting Person's employer serves as the investment adviser.

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.