FORM 4	•
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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

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02)

#### 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 Type Responses)										
<ol> <li>Name and Address of Reporting Pe Butler Richard</li> </ol>	2. Issuer Name and Ticker or Trading Symbol LIVEDEAL INC [LIVE]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner			
325 E. WARM SPRINGS ROA	(Middle) D, SUITE 102	3. Date of Earliest 7 09/01/2015	Transaction	n (M	onth/Day	/Year)		Officer (give title below)	Other (specify b	elow)
(Street) LAS VEGAS, NV 89119		4. If Amendment, I	Date Origir	nal Fi	iled(Month	/Day/Year	)	6. Individual or Joint/Group Filin, _X_Form filed by One Reporting Person Form filed by More than One Reporting		ible Line)
(City) (State)	(Zip)	Tabl	le I - Non-l	Deri	vative Se	curities	Acqui	ired, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	tion	4. Secur (A) or D (D) (Instr. 3,	isposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock (1)	09/01/2015	09/01/2015	А		1,656	А	\$ 1.51	34,529	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 SEC 1474 (9contained in this form are not 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. N	umber	6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Deri	vative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Secu	irities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Acq	uired			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				(A)	or			4)			Following	Direct (D)	
					Disp	osed						Reported	or Indirect	
					of (I	))						Transaction(s)	(I)	
					(Inst	r. 3,						(Instr. 4)	(Instr. 4)	
					4, ar	nd 5)								
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
								Date		of				
				Code V	(A)	(D)				Shares				

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Butler Richard 325 E. WARM SPRINGS ROAD SUITE 102 LAS VEGAS, NV 89119	Х							

### Signatures

/s/ Richard D. Butler, By: Jon Isaac, attorney in fact 09/03/2015 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).

Performance shares granted to the reporting person pursuant to the 2014 Omnibus Equity Incentive Plan of LiveDeal, Inc. Shares were granted to the reporting person in (1) reformance shares granted to the reporting person parents and a August 2015.

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.