## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

#### 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)													
Name and Address of Reporting Person * Stein Michael Jason					2. Issuer Name and Ticker or Trading Symbol LIVE VENTURES Inc [LIVE]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) 2732 BORTHWICK AVE.				3. Date of Earliest Transaction (Month/Day/Year) 09/28/2021					)	Officer (give title below) X Other (specify below)  Former SVP, General Counsel					
(Street)			4. If	4. If Amendment, Date Original Filed(Month/Day/Year)					ear)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
HENDE	RSON, NV	7 89044								-		, a o j 111010 mm.	one reporting	. 013011	
(City	<i>(</i> )	(State)	(Zip)		Т	able I -	Non-l	Derivative	Securi	ties Acqui	red, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Execu any			Code (Instr. 8)		4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)		A) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Following	Ownership of Form:	Beneficial
				(Mont	nth/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3	and 4)		\ /	Ownership (Instr. 4)
Commor	n Stock		09/28/2021			S		4,015	D	\$ 38.1614	7,985			D	
Kellinder.	Report on a s	срагае піс	for each class of se	- Deriv	rative Securi	ties Acq	Po co th	ersons wontained le form di	ho res in this splays	form are a currer Beneficiall	not requ itly valid		ormation spond unle rol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative			ed Date, if	4. Transaction Code	5.	r 6 a (I	. Date Exer nd Expirati Month/Day	rcisable ion Date	7. Ti e Amo Unde Secu	tle and unt of erlying rities r. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following	Ownersh Form of	

#### **Reporting Owners**

٠	Reporting Owner Name / Address	Relationships					
		Director	10% Owner	Officer	Other		
	Stein Michael Jason 2732 BORTHWICK AVE. HENDERSON, NV 89044				Former SVP, General Counsel		

### **Signatures**

/s/ Michael J. Stein	09/28/2021	
**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 number.