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Huber Joe												
Form 4												
January 15, 2	2009											
FORM	14		GECUD						r	PPROVAL		
. •	UNITE	D STATE					NGE (COMMISSION	-	3235-0287		
Check th	is box		vv as	hington,	D.C. 20:	549			Number:	January 31,		
if no long	ger STAT	FMENT O	е сна и	CES IN I	PENIFFI	CIA		NERSHIP OF	Expires:	2005		
subject to	0		T CHAN	SECUR		CIA			Estimated a			
Section 1 Form 4 o				SECON	11125				burden hou			
Form 5		oursuant to	Section 1	6(a) of the	e Securiti	ies E	xchano	e Act of 1934,	response	0.5		
obligatio	ns Section	•					-	f 1935 or Sectio	n			
may cont See Instru	unue.) of the In	•	•	- ·						
1(b).	uction	()			I							
(Print or Type I	Responses)											
				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
Huber Joe Symbol								155001				
			LIVEDI	EAL INC	[LIVE]			(Chec	ck all applicable	e)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
(Month/D				Day/Year)				DirectorX10% Owner				
10940 WILSHIRE BLVD., SUITE 01/09/20				009				Officer (give title Other (specify below) below)				
925								,	,			
(Street) 4. If				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)				Applicable Line)				
		2.4						_X_ Form filed by 0 Form filed by N				
LOS ANGE	ELES, CA 9002	24						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-Do	erivative S	Securi	ities Acc	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. Dec	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	ear) Executi	on Date, if Transaction(A) or Disposed of				d of	Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month	/Dou/Voor)	Code (Instr. 8)	(D) (Instr. 2	1 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Monui	/Day/Year)	(111501.0)	(Instr. 3,	4 anu	5)	Following	(Instr. 4)	(Instr. 4)		
						(\mathbf{A})		Reported	((
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	01/09/2009			Р	600	А	\$	1,676,250	D			
Stock	01/07/2009			1	000	Α	1.62	1,070,230	D			
Common							\$		- (1)			
Stock	01/09/2009			Р	175	А	\$ 1.75	1,676,425	D <u>(1)</u>			

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Huber Joe 10940 WILSHIRE BLVE LOS ANGELES, CA 900		Х						
Signatures								
Joseph R. Huber	01/13/2009							
<u>**</u> 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 as the custodian of a custodial account for the benefit of his child; 5,561 shares are owned by the Reporting Person's spouse; and 25,513 shares

(1) customar of a customar account for the benefit of his clinic, 5,501 shares are owned by the Reporting Person's sporse, and 25,515 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.