FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* ROSENBLATT DAVID S | | | | 2. Issuer Name and Ticker or Trading Symbol IAC/INTERACTIVECORP [IACI] | | | | | | | | | Relationship of Reporting Perso (Check all applicable) X Director | | | | on(s) to Issu 10% Ov | | | |
|---|--|------------|---|--|--------------------------|---|--|--------|---|--|---|-------------------------|--|---------------------------------|---|--------|---|-----------------------|--|---|
| | ` | TIVECORP | (Middle) | | 06 | 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2016 | | | | | | | | | | below) | give title | Other (specify below) | | |
| (Street) NEW YO | | | 10011 | | - ^{4.} - | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 5. Ind Line) X | · | | | | | | |
| (City) | (S | | (Zip) | Dori | votiv | ,o So | ouri | tios A | \ car | iirod [| Dier | acad of | or Po | nofici | ally | Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date | | | sactio | | | ite, | , Transaction Disposed O Code (Instr. 5) | | es Acquired (A) or Of (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | 10/20 | | | | | v | Amount | (A) or (D) Pri | | | Transacti (Instr. 3 a | saction(s) r. 3 and 4) | | | (IIISU: 4) | | |
| Common | Common Stock, par value \$0.001 ⁽¹⁾ 06/18/2016 M ⁽¹⁾ 1,211 A \$0 49,928 ⁽²⁾ D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any | | | 3A. Deemed Execution Da if any (Month/Day/ | ate, Transaction Code (Instr. | | | of E | | Expi | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s ully | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exer | e rcisable | Ex Da | piration te | Title | Amo or Num of Share | ber | | | | | |
| Restricted Stock Units ⁽³⁾ | \$0 | 06/18/2016 | | | М | | | 1,211 | 06/1 | 8/2015 ⁽³⁾ | 06 | /18/2017 ⁽³⁾ | Commo Stock, par valu \$0.001 | 1 1 2 | 11 | \$0 | 1,211 | 1 | D | |

Explanation of Responses:

- 1. Represents shares of IAC common stock acquired upon the vesting of restricted stock units (see footnote 3 below).
- 2. Includes (i) 44,644 shares of IAC Common Stock held directly by the reporting person and (ii) 5,284 share units accrued under the Non-Employee Director Deferred Compensation Plan as of the date of this report.
- $3. \ Represents \ restricted \ stock \ units \ that \ vest \ in \ three \ equal \ installments \ on \ the \ anniversary \ of \ the \ grant \ date \ (June \ 18, \ 2014).$

Tanya M. Stanich as Attorneyin-Fact for David S. Rosenblatt

06/21/2016

** Signature of Reporting Person

Date

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

- * 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.

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 Number.