FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO              | OVAL      |  |  |  |  |  |
|------------------------|-----------|--|--|--|--|--|
| OMB Number:            | 3235-0287 |  |  |  |  |  |
| Estimated average burd | en        |  |  |  |  |  |
| 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*  BRONFMAN EDGAR JR   |  |  |  |                             |  |   | 2. Issuer Name and Ticker or Trading Symbol  IAC/INTERACTIVECORP [ IACI ] |        |  |                    |                             |   |  |            |  | all app         | nship of Reporting Po<br>applicable)<br>oirector<br>officer (give title<br>elow)  |   | erson(s) to Issuer<br>10% Owner |  |
|---|--|--|--|-----------------------------|--|---|---|--------|--|--------------------|-----------------------------|---|--|------------|--|-----------------|---|---|---------------------------------|--|
| (Last) (First) (Middle) 75 ROCKEFELLER PLAZA                  |  |  |  |                             |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2004 |   |        |  |                    |                             |   |  |            |  |                 |   |   | Other (specify below)           |  |
| 30TH FLOOR  (Street)  NEW YORK NY 10019                       |  |  |  |                             | 4. If Amendment, Date of 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 |                 |   |   |                                 |  |
| (City) (State) (Zip)  |  |  |  |                             |  |   |   |        |  |                    |                             |   |  |            |  | Pers            | on  |   |                                 |  |
|   |  | Tabl                                       | e I - Noi  | n-Deriv                     | ative  | Se  | curitie   | s Acc  | uired,   | Dis                | posed o                     | f, o  | r Ben  | efici      | ally O   | wne             | ed  |   |                                 |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |  |  |                             |  | Execution Date,   |   |        | 3. 4. Securitie<br>Transaction<br>Code (Instr. 8) 4. Securitie<br>Disposed C |                    |                             |   |  |            | 4 and Secu<br>Bene<br>Own  |                 | cially<br>I Following   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |                                 | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |
|   |  |  |  |                             |  | Code  | v   | Amount |  | (A) or<br>(D)      | Price                       | ,  1  | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |            |  |                 | (msu. 4)  |   |                                 |  |
| Common Stock <sup>(1)</sup> 12/31/                            |  |  |  |                             |  |   |   |        | A  |                    | 588                         |   | A  | \$27.62    |  | 5,469(2)        |   | Γ   | )                               |  |
|   |  | Та   |  |                             |  |   |   |        |  |                    | sed of,<br>onvertib         |   |  |            |  | ned             |   |   |                                 |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution D<br>if any<br>(Month/Day/ | Date, Transact<br>Code (In: |  |   |   |        | 6. Date E<br>Expiratio<br>(Month/D   | n Date             |                             | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |  | ount       | 8. Pric<br>Deriva<br>Securi<br>(Instr.   | vative<br>urity | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | n:<br>ct (D)<br>ndirect         | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |  | Code V                      |  | (A) (D)   |   | Date   |  | Expiration<br>Date | Numbe<br>of<br>Title Shares |   |  | ' <b> </b> |  |                 |   |   |                                 |  |

## **Explanation of Responses:**

- 1. Share units accrued under the Non-Employee Director Deferred Compensation Plan as of December 31, 2004.
- 2. The reporting person is also the indirect beneficial owner of (i) 21,500 shares IAC Common Stock acquired by, and held for the reporting person in, an IRA, (ii) 8,500 shares of IAC Common Stock held by the reporting person in his capacity as custodian for his minor children, of which shares the reporting person disclaims beneficial ownership, and (iii) 2,050 shares of IAC Common Stock held by the reporting person's spouse, of which shares the reporting person disclaims beneficial ownership.

<u>Joanne Hawkins as Attorney-</u> <u>in-Fact for Edgar Bronfman Jr.</u>

01/04/2005

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.