## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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* Schiffman Glenn							2. Issuer Name and Ticker or Trading Symbol  IAC/INTERACTIVECORP [ IAC ]									icable) tor	on(s) to Issu	/ner			
(Last) (First) (Middle) 555 WEST 18TH STREET						3. Date of Earliest Transaction (Month/Day/Year) 06/03/2019									X Officer (give title Other (specify below)  EVP & CFO						
(Street) NEW YORK NY 10011					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City)	ty) (State) (Zip)															Person					
		Та	ble I - No	n-Dei	rivativ	ve Se	curi	ties A	Acqu	uired,	Dis	posed of	, or Ben	eficial	ly Owne	t					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				(A) or 3, 4 and	5) Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following		: Direct   I r Indirect   I str. 4)   (	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, par value \$0.001 <sup>(1)</sup> 06/03/						2019				M <sup>(1)</sup>		2,000	A	\$45.7	45.78 2,0		D				
Common Stock, par value \$0.001 <sup>(2)</sup> 06/03/						2019				S <sup>(2)</sup>		2,000	D	\$220.	56	0	D				
Common Stock, par value \$0.001 <sup>(1)</sup> 06/05/						2019				M <sup>(1)</sup>		1,000	A	\$45.78		,000	000				
Common Stock, par value \$0.001 <sup>(2)</sup> 06/05/						2019				<b>S</b> <sup>(2)</sup>		1,000	D	\$22	5	0		D			
			Table II -									osed of, o			Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	Code (In:		n of			ate Exer iration D nth/Day/	ate	le and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		ve es ally ig d tion(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e rcisable		kpiration ate	Title	Amoun or Numbe of Shares	1						
Options to Purchase Common Stock, par value \$0.001 <sup>(3)</sup>	\$45.78	06/03/2019			М			2,000	04/0	)7/2017 <sup>(3</sup>	) 04	1/07/2026 <sup>(3)</sup>	Common Stock, par value \$0.001	2,000	\$0	181,0	000	D			
Options to Purchase Common Stock, par value \$0.001 <sup>(3)</sup>	\$45.78	06/05/2019			M			1,000	04/0	07/2017 <sup>(3</sup>	04	1/07/2026 <sup>(3)</sup>	Common Stock, par value \$0.001	1,000	\$0	180,0	000	D			

## **Explanation of Responses:**

- 1. Represents shares of IAC common stock acquired upon the exercise of stock options (see footnote 3 below).
- 2. Reflects the sale of shares of IAC common stock effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 3. Represents stock options that vested/vest in four equal installments on the first four anniversaries of the grant date (April 7, 2016), subject to continued service.

Tanya Stanich as Attorney-in-Fact for Glenn H. Schiffman

06/05/2019

\*\* Signature of Reporting Person

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.