FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

shington, I	D.C. 20549		
-------------	------------	--	--

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average	e burden									

0.5

hours per response:

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

							- ( -) -				p. 7.1000								
1. Name and Address of Reporting Person*  EISNER MICHAEL D					2. Issuer Name <b>and</b> Ticker or Trading Symbol IAC Inc. [ IAC ]									5. Relationship of Reportin (Check all applicable)			ng Person(s) to Issue		
(Last)	(Fir	rst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/31/2023									21		er (give title			-
C/O THE TORNANTE COMPANY, LLC 233 SOUTH BEVERLY DRIVE, 2ND FLOOR				OOR	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						
(Street) BEVERLY CA 90212														Form filed by More than One Reporting Person					
HILLS					Rul	e 10	)b5-	1(c)	Transaction Indication										
(City)	City) (State) (Zip) Check this box to indicate that a transaction was made pursuan satisfy the affirmative defense conditions of Rule 10b5-1(c). Set																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Transac Date (Month/Da	Execution Date,		Transaction [		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)		се	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common	Stock, par	value \$0.0001 <sup>(1)</sup>		12/31/2	2023			<b>A</b> <sup>(1)</sup>		237	A	\$5	2.38	.38 161,222(2		D			
Common Stock, par value \$0.0001														40,555		I	1 1	Through a trust, of which the reporting person is trustee	
		Tai									osed of,				Owne	t			
4 100014 -		la.= ::			-	IIIS, \			-		onvertib			÷			,		4
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Transaction of Code (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)			nt of ities lying itive ity (Inst	Dei Sed (Ins	rivative derivative Securitie Str. 5) Beneficia Owned Followin Reported	Following Reported Transactio	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
					Code V (A) (D)		Date Exercis	able	Expiration Date Title Shares		er								

## **Explanation of Responses:**

- 1. Represents share units accrued under the Non-Employee Director Deferred Compensation Plan as of the date of this report.
- 2. Includes: (i)159,498 shares of IAC common stock held directly by the reporting person (personally or through a trust, of which the reporting person is the grantor/sellor, sole trustee and sole beneficiary) and (ii) 1,724 share units accrued under the Non-Employee Director Deferred Compensation Plan as of the date of this report.

Tanya M. Stanich as Attorney- 01/03/2024 in-Fact for Michael Eisner

\*\* 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.