FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPROVAL | | | | | | | | | | | |
|---|---------------------|-----------|--|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | | |
| l | Estimated average l | nurdon | | | | | | | | | | |

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

| 1. Name and Address of Reporting Person* | | | | | | 2. Issuer Name and Ticker or Trading Symbol IAC/INTERACTIVECORP [IACI] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|--|---------|-------------|--------|-------------------------|---|---|--|-------------------|---|---------------------|---|--|---|---|---|---|---|--|
| <u>RATTNER STEVEN</u> | | | | | | MIO/IIVIDIMICITY DOOM [IACI] | | | | | | | | | X D | irector | 109 | Owner | |
| (Last) (First) (Middle) 375 PARK AVE. 14TH FL. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2008 | | | | | | | | | | Officer (give title elow) | Oth belo | er (specify w) | |
| | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | 1 | | | | | | | | | | Line) | | | | |
| NEW YORK NY 10152 | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | |
| | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non | -Deriv | ative | Se | curitie | s Acc | quired, | Dis | osed o | f, or | Bene | eficia | lly Ov | vned | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispo | | Disposed | urities Acquired (A) sed Of (D) (Instr. 3, | | | nd Se Be Ov | Amount of curities neficially vned Following ported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect t Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (| A) or D) | Price | Tra | ansaction(s) str. 3 and 4) | | (1130.4) | |
| Common Stock, par value \$0.001 ⁽¹⁾ 06/30/ | | | | | | /2008 | | М | | 714 | | A | |) | 26,101 ⁽²⁾ | D | | | |
| | | Та | able II - D | | | | | • | • | | sed of, onvertib | | | | / Own | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | ative Conversion Date Execution Date Conversion Date Execution Date Conversion C | | Date, | | (A) Disp of (Instr. Sec | | ative rities ired osed | 6. Date Exercisable Expiration Date (Month/Day/Year) Date Exercisable Expir | | Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Security (Instr. and 4) | | ount nber | 8. Price Derivati Security (Instr. 5) | ve derivative Securities | Ownersh Form: Direct (D or Indirec (I) (Instr. | Beneficial Ownership t (Instr. 4) | | | |

Explanation of Responses:

- 1. Represents share units accrued under the Non-Employee Director Deferred Compensation Plan as of June 30, 2008.
- 2. Includes (i) 17,754 shares of IAC Common Stock held directly by the reporting person and (ii) 8,347 share units accrued under the Non-Employee Director Deferred Compensation Plan as of June 30, 2008.

<u>Joanne Hawkins as Attorney-</u> in-Fact for Steven Rattner

07/02/2008

** 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.