FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| OMB APPROVAL | | | | | | | | | | |
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| OMB Number: | 3235-028 | | | | | | | | | |
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| 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* VON FURSTENBERG DIANE | | | | | | 2. Issuer Name and Ticker or Trading Symbol IAC/INTERACTIVECORP [IACI] | | | | | | | | | | elationship o ck all applic Director | able) | g Pers | on(s) to Iss | |
|---|--|--|--|---------|------------------|--|-----|-------|--------------|---|----------|--|-------------------|-----------------|--|--|--|--|--|---|
| (Last) | (F ST 14TH S | First) | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/19/2008 | | | | | | | - | Officer (below) | (give title | | Other (: below) | specify | | |
| (Street) NEW YORK NY 10014 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | Addividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | sactio | action 2A. Deemed Execution Date | | | ate, | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | |) or | or 5. Amount | | Form (D) or ollowing (I) (In | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | Code | v | Amount | (A) or (D) Pri | | rice | Transaction(s) (Instr. 3 and 4) | | | | (|
| Common Stock, par value \$0.001 ⁽¹⁾ 07/19 | | | | | 9/200 | /2008 | | | | M ⁽¹⁾ | | 2,251 A | | \$0 | 29,817(2) | | | D | | |
| | | | Table II - | | | | | | | | | sed of, onvertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day/ | ate, Ti | ransa Code (I | nsaction construction le (Instr. I | | of Ex | | ate Exercisable and ration Date nth/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owi For Illy Dire or li (I) (I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | С | Code | v | (A) | (D) | Date Exer | cisable | Ex Da | piration te | O N o | | ımber | | | | | |
| Restricted Stock | \$0 | 07/19/2008 | | | M | | | 2,251 | 07/1 | 9/2006 ⁽³⁾ | 07. | /19/2008 ⁽³⁾ | Common | 2 | ,251 | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Reflects shares of IAC common stock acquired upon the vesting of restricted stock units (see footnote 3 below).
- 2. Includes (i) 24,756 shares of IAC Common Stock and (ii) 5,061 share units accrued under the Non-Employee Director Deferred Compensation Plan as of the date of this report.
- $3. \ The \ terms \ of \ the \ initial \ award \ provide \ for \ vesting \ in \ equal \ installments \ on \ the \ anniversary \ of \ the \ grant \ date, \ July \ 19, \ 2005.$

<u>Joanne Hawkins as Attorney-in-</u> <u>Fact for Diane Von Furstenberg</u> <u>07/22/2008</u>

** 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.