FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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* <u>Schwerdtman Michael H</u>						2. Issuer Name and Ticker or Trading Symbol IAC/INTERACTIVECORP [IACI]									(Che	ck all applic Director	r		son(s) to Issuer 10% Owner Other (specify	
	/INTERAC	CTIVECORP	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/10/2007									X	Officer (give title below) SVP & C		Contr	below)	
152 WEST 57TH STREET, 42ND FLOOR				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW Y	ORK N	Y	10019											Line)	X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	state)	(Zip)													Person				
		Ta	ble I - No	n-Deri	ivativ	ve Se	curi	ties A	\cqı	uired,	Dis	osed of	, or Be	nefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I				Execution Date		ate, Transaction D Code (Instr.			ecurities Acquired (A) posed Of (D) (Instr. 3, 4			Beneficia Owned F	s Form lly (D) o ollowing (I) (I		: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)		ce	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock, par value \$0.001 ⁽¹⁾ 02/10/				10/20	2007			M ⁽¹⁾		4,482	A \$		\$ <mark>0</mark>	6,298			D			
Common	Stock, par	value \$0.001 ⁽²⁾		02/1	10/20	07				F ⁽²⁾		1,605	D	\$3	39.62	2 4,693 D				
			Table II -									sed 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. Deemed Execution Dat if any (Month/Day/Yo	ate,	Code (li				6. Date Exercisab Expiration Date (Month/Day/Year)			le and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e de la companya de l	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable	E) Da	piration tte	Title	or Nur of	ımber					
Restricted Stock Units	\$0	02/10/2007			M			1,320	02/1	.0/2006 ⁽³	02	/10/2010 ⁽³⁾	Common Stock	1,3	320	\$0	3,960)	D	
Restricted Stock	\$0	02/10/2007			M			3,162	02/1	.0/2006 ⁽⁴⁾	02	/10/2010 ⁽⁴⁾	Common	3,	162	\$0	9,486	ô	D	

Explanation of Responses:

- 1. Represents shares of IAC Common Stock acquired upon the vesting of restricted stock units (see footnotes 3 and 4 below).
- 2. Represents the withholding of shares of IAC Common Stock for the payment of taxes in connection with the vesting of restricted stock units (see footnotes 3 and 4 below).
- $3. \ The terms of the initial grant provide for vesting in equal installments over five years on the anniversary of the grant date, February 10, 2005.$
- 4. The terms of the initial grant provide for vesting in equal installments over five years on the anniversary of February 10, 2005.

Joanne Hawkins as Attorney-in-

Fact for Michael H.

02/13/2007

Schwerdtman

** Signature of Reporting Person Date

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

- * 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.