FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| notruction 1/h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 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* BRONFMAN EDGAR JR | | | | | | 2. Issuer Name and Ticker or Trading Symbol IAC/INTERACTIVECORP [IACI] | | | | | | | | | | | olicable) | | Person(s) to Issuer 10% Owner | |
|---|---|--|---|---------|--------------------------------|---|---------|--------------------------------------|------------------------------------|--|---------------------|---|---------------------------------|--------|-----------------------|---|---|---|--|--|
| | • | CTIVECORP | Middle) | | 03/ | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2013 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indiv | Officer (give title below) | | | Other (specify below) Filing (Check Applicable | |
| (Street) NEW YO (City) | | | 10011 (Zip) | | | Line) X Form filed by | | | | | | | | | | n filed by One n filed by Mor | One Reporting Person More than One Reporting | | | |
| | | Tabl | le I - No | n-Deriv | ative | Se | curitie | es Acc | quired, | Dis | posed o | f, or | Bene | efici | ally | Owne | ed | | | |
| | | | 2. Transaction Date (Month/Day/Year) | | ur) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) o I Of (D) (Instr. 3, 4 | | | l and Securi Benefi Owned | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (| (A) or (D) Prio | | | | ction(s) and 4) | | | (Instr. 4) |
| Common | Common Stock, par value \$0.001 ⁽¹⁾ 03. | | | | /2013 | | | A ⁽¹⁾ | A ⁽¹⁾ 11 | | | A \$41.2 | | .24 | 60,664(2) | | | D | | |
| Common | Stock, par | value \$0.001 | | | | | | | | | | | | | | 5,375 I By I | | | | By IRA |
| Common Stock, par value \$0.001 | | | | | | | | | | | | | | | | 2, | .125 ⁽³⁾ | | I | As custodian for minor children |
| | | Та | | | | | | | | | sed of, onvertib | | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | n Date, | 4. Transactio Code (Inst | | on of | | 6. Date E Expiratio (Month/E | n Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | Deri Secu | rivative | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Oi Fo Di (I) | wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | \ \v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | nber | | | | | | |

Explanation of Responses:

- 1. Represents share units accrued under the Non-Employee Director Deferred Compensation Plan as of March 1, 2013.
- 2. Includes (i) 41,021 shares of IAC Common Stock held directly by the reporting person and (ii) 19,643 share units accrued under the Non-Employee Director Deferred Compensation Plan as of March 1,
- 3. The reporting person disclaims beneficial ownership of these shares of IAC Common Stock.

Joanne Hawkins as Attorneyin-Fact for Edgar Bronfman Jr.

03/05/2013

** 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.