

IAC/INTERACTIVECORP

Reported by **BRONFMAN EDGAR JR**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/04/17 for the Period Ending 12/31/16

Address 555 WEST 18TH STREET

NEW YORK, NY 10011

Telephone 2123147300

CIK 0000891103

Symbol IAC

SIC Code 5990 - Retail Stores, Not Elsewhere Classified

Industry Internet Services

Sector Technology

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *					2.	Issue	r Name	and Tick	er o	r Tradi	ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
BRONFMA	N EDGA	R JR			ΙA	C/I	NTE	RACTIV	VE(CORI	P [IAC	[I					
(Last) (First) (Middle)				3.	Date	of Earl	iest Transa	actio	n (MM/	DD/YYYY	X Director	XDirector10% Owner Officer (give title below) Other (specify below)					
								400				Officer (gr	ve title belov	v)0	ther (specify	below)	
C/O IAC/INTERACTIVECORP, 555						12/31/2016											
WEST 18TH																	
(Street)					4.	lf An	nendme	ent, Date C)rigi	nal Fil	ed (MM/D	Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
NEW YORK, NY 10011														X Form filed by One Reporting Person			
(City) (State) (Zip)											Form filed by	Form filed by More than One Reporting Person					
			Table	e I - No	on-Dei	rivati	ive Sec	urities Ac	guir	red, Di	sposed o	f, or l	Beneficially Own	ed			
			s. Date	2A. Deemed Execution Date, if any		(Instr. 8)		4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)		red (A)	5. Amount of Securi	(Instr. 3 and 4) Form:		Ownership	Beneficial		
						Code	V	Amour	(A) or (D)	Price					(Instr. 4)		
Common Stock, par value \$0.001 (1) 12/31/2010				2016			A (1)		193	A	\$64.79	8	87733 (2)				
Common Stock, par value \$0.001													2125			As custodian for minor children	
Common Stock, par value \$0.001													5375			By IRA	
	Tab	ole II - Dei	rivativ	e Secu	rities]	Bene	ficially	Owned (e.g.	, puts,	calls, w	arran	ts, options, conve	ertible sec	curities)		
	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. De Executi Date, if	ion (l. Trans. Instr. 8)	Acq Disp				6. Date Exercisable and Expiration Date		Securi Deriva	e and Amount of ties Underlying ative Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	V	(A)	(D)	Dat Exe	e rcisable	Expiration Date		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect) (I) (Instr. 4)	

Explanation of Responses:

- Represents share units accrued under the Non-Employee Director Deferred Compensation Plan as of the date of this report.
- Includes (i) 63,673 shares of IAC Common Stock held directly by the reporting person and (ii) 24,060 share units accrued under the Non-Employee Director
- 2) Deferred Compensation Plan as of the date of this report.

Reporting Owners

reporting o where							
Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BRONFMAN EDGAR JR							
C/O IAC/INTERACTIVECORP	X						
555 WEST 18TH STREET							
NEW YORK, NY 10011							

Signatures

Joanne Hawkins as Attorney-in-Fact for Edgar Bronfman Jr.

** 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 control number.