FORM 4

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

OMB APPR	OVAL
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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).

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

(Print or Type	e Responses	s)																		
Name and Address of Reporting Person * Liberty Interactive Corp					2. Issuer Name and Ticker or Trading Symbol Expedia, Inc. [EXPE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last) (First) (Middle) 12300 LIBERTY BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 11/04/2016								Office	r (give title belo	w)	Othe	r (specify)	below)	
(Street)				4. I	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person							
ENGLEW	OOD, CO	O 80112											Form filed by More than One Reporting Person							
(City)		(State)		(Zip)			Table 1	I - N	on-l	Derivative S	Secu	urities	Acqui	red, Dispo	osed of, or I	Beneficiall	y Ow	ned		
(Instr. 3) Date Ex (Month/Day/Year) an			Execut any	A. Deemed 3. Recution Date, if Code Month/Day/Year) (Instr. 8)		n	(Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership I Form:		Beneficial Ownership				
							Cod	e	v	Amount	t	(A) or (D)	Price				(I) (Instr		insu	. 4)
Common S	Stock		11/04/	2016			J ⁽¹⁾	ì		10,807,0	26	D	\$ 0	0	I			1	Held through wholly- owned subsidiary	
Class B Common Stock 11/04		11/04/	2016)		12,799,9	99	D	\$ 0	0					Held through wholly- owned subsidiary		
Reminder: R	Report on a s	separate lind	e for each		I - Deri	vative Secu	rities A	.cqui	P co th	ersons whontained in ne form dis , Disposed	of, o	nis for ays a c or Ben	m are curren	not reqเ ntly valid	ction of inf ired to res OMB conf	pond un	less	SEC	1474	4 (9-02)
1 741 . 6 0	2	2	4:	24 D		puts, calls,		nts, o					T	411	0 D.: f	0 N		10		11 N
(Instr. 3) I		3. Transac Date (Month/Da			Date, if	4. Transactic Code (Instr. 8)	5. Num of Deri Secu Acqu (A) o Disp of (I (Inst 4, an	vativaritie uired or oosed O) r. 3,	a (1	and Expiration Date (Month/Day/Year)		Amo Undo Secu	tle and ount of erlying rities r. 3 and	8. Price of Derivative Security (Instr. 5) Beneficia Owned Followin, Reported Transacti (Instr. 4)		Ownership Form of Derivative Security: Direct (D) or Indirect		hip of live over the live over	Beneficia Ownershi (Instr. 4)	
						Code	V (A)	(D	E	Date Exercisable		oiratior te	Title	Amount or Number of Shares						

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Liberty Interactive Corp 12300 LIBERTY BOULEVARD ENGLEWOOD, CO 80112	X	X						

Liberty Interactive Corporation By: /s/ Craig Troyer Title: Vice President, Deputy General Counsel and Assistant				
Secretary				
**Signature of Reporting Person		Date		

Explanation of Responses:

Signatures

- * 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).
- On November 4, 2016, the Reporting Person completed its previously announced split-off (the "Split-Off") of its wholly-owned subsidiary Liberty Expedia Holdings, Inc.

 (1) ("Splitco"), pursuant to which the Reporting Person redeemed (i) 0.4 of each outstanding share of its Series A Liberty Ventures common stock for 0.4 of a share of Splitco's Series A common stock and (ii) 0.4 of each outstanding share of its Series B Liberty Ventures common stock for 0.4 of a share of Splitco's Series B common stock. In connection with the Split-Off, the Reporting Person's beneficial ownership of the Common Stock and Class B Common Stock was transferred to Splitco.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.