FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL							
OMB Number:	OMB Number: 3235-0104						
Estimated avera	Estimated average burden						
hours per respo	onse: 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

Liberty Interactive Corp			2. Date of Event Requiring Statement (Month/Day/Year) 12/20/2011  3. Issuer Name and Ticker or Trading Symbol TripAdvisor, Inc. [ TRIP ]								
(Last)	(First)	(Middle)	<b>-</b> , <b>-</b> 0, <b>-</b> 0, 1		4. Relationship of Reporting Perso (Check all applicable)  Director X	on(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
					Officer (give title below)	Other (spe		6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street)					20.011)	20.011)		X	Form filed by	y One Reporting Person	
ENGLEWOO	D CO	80112							Form filed by Reporting P	y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, par value \$.001 per share					21,809,904	I		By wholly-owned subsidiary			
Class B Common Stock, par value \$.001 per share					12,799,999	I		By wholly-owned subsidiary			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securit		4. Conver or Exer Price o	rcise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivat Securit	ive	or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

/s/ Pamela L. Coe, Vice

**President** 

\*\* Signature of Reporting Person Date

12/29/2011

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 5 (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.