## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to<br>Section 16. Form 4 or Form 5<br>obligations may continue. See | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP                           |
|---|--|
| Instruction 1(b).   | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

|   |                     |       |                                      |   | or Sec  | tion 30(h) of the Í   | nvestmer | nt Con  | npany Act   | of 1940    |  |   |   |                                       |       |            |
|---|---------------------|-------|--------------------------------------|---|---|---|----------|---|---|------------|--|---|---|---------------------------------------|-------|------------|
| 1. Name and Address of Reporting Person* HORAN PETER  |                     |       |                                      |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol  Tree.com, Inc. [ TREE ] |   |          |   |   |            |  | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |   |                                       |       |            |
| TOTALLI LILIE   |                     |       |                                      |   |   |   |          |   |   |            |  | Direc   |   |                                       | Owner |            |
| (Last) (First) (Middle) 11115 RUSHMORE DRIVE  |                     |       |                                      | 3. Date of Earliest Transaction (Month/Day/Year) 02/18/2009 |   |   |          |   |   |            | Offic<br>below   | er (give title<br>w)  | Othe<br>belo  | er (specify<br>w)                     |       |            |
|   |                     |       |                                      | 4. If An  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                    |   |          |   |   |            |  | 6. Individual or Joint/Group Filing (Check Applicable   |   |                                       |       |            |
| (Street) CHARLOTTE NC 28277   |                     |       |                                      | Jacob Signal ned (monarcay) (ed.)                           |   |   |          |   |   |            | Line) X Form filed by One Reporting Person   |   |   |                                       |       |            |
|   |                     |       |                                      |   |   |   |          |   |   |            |  | Form filed by More than One Reporting<br>Person   |   |                                       |       |            |
| (City)  | City) (State) (Zip) |       |                                      |   |   |   |          |   |   |            |  |   |   |                                       |       |            |
|   |                     | Tab   | e I - Nor                            | n-Deriv   | ative S   | ecurities Acc   | quired,  | Dis   | posed o   | f, or B    | Benefi   | cially  | Own   | ed                                    |       |            |
| 1. Title of Security (Instr. 3)  2. Trans Date (Month)  |                     |       | action<br>Day/Year)                  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code  | Transaction<br>Code (Instr.                                   |          | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5) |   |            | Securities Beneficiall Owned Fol   |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | Ownership                             |       |            |
|   |                     |       |                                      |   |   |   | Code     | v   | Amount  | (A)<br>(D) | ) or Pr  | ice   |   | ted<br>action(s)<br>3 and 4)          |       | (Instr. 4) |
| Common Stock  |                     |       | 02/18/2009                           |   |   | P   |          | 100   | I   | A \$       | \$4.07   |   | 3,307   | D                                     |       |            |
| Common Stock  |                     |       | 02/18/2009                           |   |   | P   |          | 237   | 1   | A :        | \$4.1  |   | 3,544   | D                                     |       |            |
| Common Stock  |                     |       | 02/18/2009                           |   |   | P   |          | 1,263   | 1,263 A   |            | 34.25  | ,   | 4,807   | D                                     |       |            |
| Common Stock 02/18  |                     |       |                                      | 3/2009  |   | P   |          | 1,400   | 1,400 A   |            | 64.22  | 6,207   |   | D                                     |       |            |
|   |                     | Ta    |                                      |   |   | urities Acqu<br>s, warrants,                                  |          |   |   |            |  |   | wned  |                                       |       |            |
| 1. Title of Derivative Security  (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Month/Day/Year)  33. Transaction Date Execution Date, if any (Month/Day/Year) |                     | Date, | 4.<br>Transactic<br>Code (Inst<br>8) | ransaction of E<br>ode (Instr. Derivative (                 |   | 6. Date Exercisable and<br>Expiration Date<br>Month/Day/Year) |          |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |            | 8. Price of Derivative Security (Instr. 5)  (Instr. 5)  Beneficially Owned Following Reported Transaction (Instr. 4) |   | Ownershi<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4   | Beneficial<br>Ownership<br>(Instr. 4) |       |            |

Date Exercisable

**Explanation of Responses:** 

/s/ Jacqueline Jones as Attorney-in-Fact for Peter

Amount or Number

of Shares

02/20/2009

**Horan** 

Title

Expiration

Date

\*\* 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).

Code

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.

(A) (D)