FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
---------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5

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

See

Footnote

obligations may continue. See Instruction 1(b). Filed					t to Section 16(a) o	of the Se	curitie	es Exchange A	34		hours	per response:	0.5		
					tion 30(h) of the Inv										
1. Name and Address of Reporting Person* ROBERTS EDWARD B				2. Issuer Name and Ticker or Trading Symbol SOHU COM INC [SOHU]						(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
——————————————————————————————————————										-	Director Officer (give	e title	10% Owner tle Other (specify		
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/03/2014							below) below)				
300 BOYLST	TON STREET														
				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) BOSTON	MA	02116								X	Form filed I	by One	Reporting Pers	son	
											Form filed I Person	by Mor	e than One Rep	orting	
(City)	(State)	(Zip)													
		Table I - No	n-Deriva	tive S	ecurities Acqu	uired,	Disp	osed of, o	r Ben	eficially	Owned				
Date		2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (5)	Acquired D) (Instr.	(A) or 3, 4 and	5. Amount of Securities Beneficially Owned Follow Reported	y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V		Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)			(111311.4)	
Common Stock			01/03/	2014		A		1,812(1)	Α	\$0	24,073	2)	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(**************************************														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Common Stock

- 1. 1,812 restricted stock units were granted on January 3, 2014, with 50% vesting on July 1, 2014 and 50% vesting on December 31, 2014. The restricted stock units are settleable upon vesting in shares of
- 2. Includes1,812 restricted stock units granted on January 3, 2014.
- 3. Includes 148,709 shares held by the Edward B. Roberts Trust 2003, 125,420 shares held by the Nancy H. Roberts Trust, and 145,978 shares held by the Edward B. Robert 2012 Qualified Annuity Trust #2 as of the date of this report on Form 4. The Reporting Person is a trustee of each of these trusts.

/s/ Edward B. Roberts 01/07/2014

420,107(3)

** 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.