FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						

hours per response:

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Expires:

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

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

1. Name and Address of Reporting Person*  ROBERTS EDWARD B					2. Issuer Name <b>and</b> Ticker or Trading Symbol SOHU COM INC [ SOHU ]										S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last)							3. Date of Earliest Transaction (Month/Day/Year) 05/28/2003										etor er (give title v)	y	_	(specify	
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)										vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person					
(City)	(St		Zip)			Form filed by More than One Reporting Person												orting			
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, oı	r Bene	efici	ally	Owne	ed				
Da				2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Secur Benef Owne		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount		(A) or (D)	Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common Stock 05					/2003				J <sup>(1)</sup>		200,00	0	D	20	0.03		95,747		D		
Common Stock 05/28					2003			J <sup>(2)</sup>		200,000		D	19.44		695,747 <sup>(3)</sup>			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. Deeme Execution if any (Month/Da	Date,	4. Fransaction Code (Instr. B)		of		6. Date Exercis Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			Deri Secu	rice of ivative curity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	F C	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or Nun of	nber							

## **Explanation of Responses:**

- 1. The Reporting Person has pledged these shares to SmithBarney/Citigroup pursuant to a pre-paid forward sales contract under which he received consideration of \$20.03 per share. Depending on the common stock market price on May 31, 2005, the Reporting Person may receive additional consideration for such shares.
- 2. The Reporting Person has pledged these shares to SmithBarney/Citigroup pursuant to a pre-paid foward sales contract under which he received consideration of \$19.44 per share. Depending on the common stock market price on May 30, 2006, the Reporting Person may receive additional consideration for such shares.
- 3. The Reporting Person also indirectly owns 11,050 shares of common stock as co-trustee of the Mitchell J. Roberts 1994 Trust.

05/29/2003 **Edward Roberts** 

Date

\*\* Signature of Reporting Person

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.