FORM	4
------	---

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

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

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

#### 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 Responses)		n								
1. Name and Address of Reporting Per BOUSQUET CHAVANNE PA	2. Issuer Name <b>and</b> Ticker or Trading Symbol HSN, Inc. [HSNI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
C/O HSN, INC., 1 HSN DRIVI		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2009						Officer (give title below)	Other (specify b	pelow)
(Street) ST. PETERSBURG, FL 33729	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 Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership
Common Stock, par value $\$0.01$ per share $\frac{(1)}{}$	03/31/2009		A <sup>(1)</sup>		2,918	А	\$ 5.14	4,981	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	umber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	erivativ	e		Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Se	ecuritie	5		(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				A	cquired			4)			Following	Direct (D)	
					(A	A) or						Reported	or Indirect	
					D	isposed						Transaction(s)	(I)	
					of	(D)						(Instr. 4)	(Instr. 4)	
					(II	nstr. 3,								
					4,	and 5)								
										Amount				
										or				
								Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	/ (/	A) (D	)			Shares				

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BOUSQUET CHAVANNE PATRICK C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729	Х						

## **Signatures**

/s/ Linda C. Frazier, as attorney in fact	04/02/2009
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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).
- (1) Represents share units accrued under the Non-Employee Director Deferred Compensation Plan as of March 31, 2009.

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.