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

(Duint an Ta

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

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SEC 1474 (9-02)

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

(Find of Type Responses)										
1. Name and Address of Reporting Person – HENCHEL GREGORY J	2. Issuer Name and HSN, Inc. [HSN		Fradir	ng Symbo	1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) C/O HSN, INC., 1 HSN DRIVE		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2010						X_Officer (give title below) Other (specify below) EVP, GC & Secretary		
(Street) ST. PETERSBURG, FL 33729		4. If Amendment, D	ate Original	Filed	(Month/Day	/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
Title of Security 2. Transaction Date (Month/Day/Yea		Execution Date, if any	(Instr. 8)	ion	(A) or Disposed of (D)			Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	· · · · · · · · · · · · · · · · · · ·	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)

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

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

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
		3. Transaction	3A. Deemed	4.		5. Numbe		6. Date Exerci		7. Title and				10.	11. Nature
Derivative	Conversion		Execution Date, if	Transact				Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Securitie	s	(Month/Day/Y	ear)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	1 ()		(Instr. 3 and 4) (Instr. 5)		Beneficially	Derivative	Ownership			
	Derivative					or Disposed					-	(Instr. 4)			
	Security					of (D)							0	Direct (D)	
					(Instr. 3, 4,						- F	or Indirect			
				and 5)							Transaction(s)	< / <			
											Amount		(Instr. 4)	(Instr. 4)	
								Date	E		or			1	
								Exercisable	Expiration Date	Title	Number			1	
								Exercisable	Date		of			1	
				Code	V	(A)	(D)				Shares				
										Common					
Restricted										Stock,				1	
Stock		02/01/2010				15 270		02/15/2011	<u>(1)</u>	· · · ·	15 270	¢ 0	15 279	D	
	\$ 0	03/01/2010		Α		15,378		02/15/2011		par value	· ·	\$ 0	15,378	D	
Units (1)										\$0.01 per				1	
										share				1	

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
HENCHEL GREGORY J C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729			EVP, GC & Secretary						

Signatures

 Linda C. Frazier, as attorney-in-fact
 03/03/2010

 **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 a grant of HSNi restricted stock units pursuant to HSNi's Second Amended and Restated 2008 Stock and Annual Incentive Plan, as amended. The terms of the grant provide for vesting in equal installments over five years on the anniversary of February 15, 2010.

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.