# FORM 4

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

OMB APPROVAL
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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).

#### 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 Ty	pe Response	s)														
Name and Address of Reporting Person * Costello William				2. Issuer Name and Ticker or Trading Symbol HSN, Inc. [HSNI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O HSN, INC., 1 HSN DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2011							Office	r (give title belo	ow)	Other (specify b	elow)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
ST. PET	ERSBURG	G, FL 33729	)											one responding	. 013011	
(City	)	(State)	(Zip)		Tab	ole I -	Non-	Deri	vative S	Securitie	es Acq	uired, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			(Instr. 8)		(A) or Dispo (Instr. 3, 4 and		Disposed	of (D	) Beneficia	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Ye	ear)	Cod	e	v	Amount	(A) or t (D)	Price	(Instr. 3 a	and 4)		\ /	Ownership (Instr. 4)
Common \$0.01 per	Stock, pa r share	r value	12/31/2011			A <sup>(1)</sup>	)		345	+ ` ´	\$ 36.2	6 42,730	(2)		D	
				Derivative Secu			tl uired	onta he fo	ained in orm dis sposed o	n this fo splays a of, or Be	orm a a curr enefici	ently valid	uired to res OMB cont	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2	3. Transactio		(e.g., puts, calls,			-					S) Title and	& Price of	9. Number	of 10.	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security		Execution Da	tte, if Transactic Code (Instr. 8)	le of tr. 8) Do Se Ao (A Di of		Number an		Date Exercisable 1 Expiration Date onth/Day/Year)		Aı Uı Se	mount of nderlying curities nstr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	nip of Indirect Beneficia Ownershi (Instr. 4)
				Code	V (	(A) (		Date Exerc		Expirati Date	on Ti	Amount or Number of Shares				

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Costello William C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729	X						

## **Signatures**

/s/ Linda C. Frazier, as attorney-in-fact	01/04/2012
**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 for the quarter ended December 31, 2011 under the Non-Employee Director Deferred Compensation Plan.

  Represents (i) 32,711 shares of common stock held directly by the reporting person, including 50.498 shares credited on November 16, 2011 to the reporting person's
- (2) account in connection with the reinvestment of cash dividends declared by the company in accordance with the terms of the company's Stock and Annual Incentive Plan and (ii) 10,019 deferred share units, including 33.621 shares credited on November 16, 2011 to the reporting person's account in connection with the reinvestment of cash dividends declared by the company in accordance with the terms of the company's Stock and Annual Incentive Plan.

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.