## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

Name and Address of Reporting Person * BOYD MICHAEL C			2. Issuer Name and Ticker or Trading Symbol HSN, Inc. [HSNI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
1 HSN DRI				3. Date of Earliest Transaction (Month/Day/Year) 03/12/2012						Officer (give title below) Other (specify below)						
(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 Acqu						s Acqui	lired, Disposed of, or Beneficially Owned						
(Instr. 3)		Date	(Month/Day/Year)		n Date, if	Code (Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ally Owned l Transaction	t of Securities ly Owned Following Fransaction(s)		7. Nature of Indirect Beneficial	
					(Month/D	Jay/Year)	Cod	e V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common St \$0.01 per sh		·value	03/12	2/2012			S		2,500	D 3	\$ 37.63	11,194	(2)		D	
Reminder: Rep	port on a s	eparate line fo	or each	class of secur	rities benef	eficially or	wned di	·			ond to t	the collec	ction of inf	ormation	SEC	1474 (9-02)
•	port on a s	eparate line fo	or each	Table II -	Derivativo	e Securit	ies Acq	Pe co the	rsons whentained in the form distributed by the form distributed by the form distributed by the form of the form o	no respo n this fo splays a of, or Be	orm are a currer eneficial	not requesting ntly valid	uired to res	ormation spond unle trol numbe	ss	1474 (9-02)
Reminder: Rep  1. Title of Derivative Security (Instr. 3) Pri De		3. Transactio Date (Month/Day/	n 3	Table II -	Derivative (e.g., puts, 4. tte, if Trai	re Securities, calls, was unsaction de str. 8)	ies Acq arrants	Pe co the uired, option 6. an (N	rsons whentained in the form distributed by the form distributed by the form distributed by the form of the form o	no responding this formula of, or Be tible securing the control of	eneficial urities) 7. Ti Amo Undo Secu	not requesting ntly valid	OMB conf	spond unle	of 10. Owners Form of Derivat: Security Direct ( or Indir	11. Nation of Indir Benefic Owners (Instr. 4

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BOYD MICHAEL C						
1 HSN DRIVE	X					
ST. PETERSBURG, FL 33729						

## Signatures

/s/ Linda C. Frazier, as attorney-in-fact	03/14/2012
**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).
- This transaction was executed in multiple trades ranging in price from \$37.63 to \$37.64 per share. The price above reflects the weighted average sales price. The reporting (1) person hereby undertakes to provide full information regarding the number of shares and prices at which the transaction was effected upon request of the SEC staff, the issuer or a security holder of the issuer.
- (2) Includes 34.2170 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.