FORM 4

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

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

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 Type	e Responses)																
1. Name and Costello V	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								
C/O HSN,		3. Date of Earliest Transaction (Month/Day/Year) 05/18/2012								Officer (give	e title below)	Oti	ner (specify be	low)			
(Street)				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						
ST. PETERSBURG, FL 33729											- 1 on the of prote than one reporting reison						
(City)		(State)	(Zip)			T	able I - N	lon-l	Derivativ	e Securitio	es Acqu	ired, I	Disposed	of, or Bene	ficially Owr	ied	
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day		ate, if	(Instr. 8)		ction 4. Securities Acq (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Owr Tran		Owned Following Reported Fransaction(s)			Form:	Beneficia	
				(Month/	<i>D</i> ау/	r ear)	Code	,	V Amoi	(A) or (D)	Price	(Instr. 3 and 4)				Direct (D) or Indirect (I) (Instr. 4)	Ownersh (Instr. 4)
Common S	Stock, par	value \$0.01 per	05/19/2012				M ⁽¹⁾		1,95	2 A	\$ 0	45,098 ⁽²⁾			D		
Reminder: R	eport on a se	parate line for each	class of securities b	oeneficiall	y ow:	ned dir		Per in ti	sons wh		equire	d to r	espond	unless the	tion contai e form	ned SEC	C 1474 (9-0
·	1	1 .	•	(e.g., puts		ls, war	rants, op	tion	s, conver	of, or Bend tible secur	ities)				T .	- T	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year)		if Transaction Code Sear) (Instr. 8) Acor (C)		Deriva Securi Acqui or Dis (D)	ccurities cquired (A) Disposed of 0) astr. 3, 4, and		and Expiration Date (Month/Day/Year)		7. Title and Amour of Underlying Securities (Instr. 3 and 4)		g		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Owners Form o Derivat Security Direct (or Indir (s) (I)	of Bene Owno (Instruction (D) rect
				Code	v	(A)	(D)	Dat Exe	te ercisable	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	(Instr.	4)
Restricted Stock Units	\$ 0	05/19/2012		М		, ,	1,952		(3)	(3)	Stor par v \$0.01	mon ck, value l per	1,952	\$ 0	0	D	
Restricted Stock Units	\$ 0	05/18/2012		A		2,712	2		(4)	<u>(4)</u>	Stor par v \$0.01	ck, alue l per	2,712	\$ 0	2,712	D	

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	05/22/2012
**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 shares of the company's common stock acquired upon the vesting of restricted stock units ("RSUs").
- (2) Represents 34,718 shares of common stock and 10,380 deferred share units.
- (3) Represents RSUs which vested on May 19, 2012.
- Represents a grant of RSUs in connection with the reporting person's continuous service as a non-employee director of the company. The terms of the grant provide for 100% vesting on
- (4) the first anniversary of the grant date i.e. on May 18, 2013. The RSUs will be settled in shares of the company's common stock six months following the reporting person's retirement or other termination of service as a director.

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.