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

(Print or Type	e Responses)														
Name and Address of Reporting Person * Attinella Michael			2. Issuer Name and Ticker or Trading Symbol HSN, Inc. [HSNI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner						
(Last) (First) (Middle) C/O HSN, INC., 1 HSN DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 06/20/2012					X	X Officer (give title below) Other (specify below) CAO					
(Street) ST. PETERSBURG, FL 33729				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	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)	RSDORG,	(State)	(Zip)			Tab	le I -	Non-Derivat	ive Securit	ies Acquired	l. Dispose	d of, or Ber	neficially Own	ned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if Code (Instr. 8) (Month/Day/Year) Code			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		quired of (D) Ow Trai	5. Amount of Securities Beneficially			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Reminder: R	eport on a se	parate line for eac		Derivative	Secur	ities .	Acqu	Persons	who respo d in this fo olays a cur ed of, or Be	rrently valid	required d OMB c	d to respo	nd unless th		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Ye	3A. Deemed Execution Date	4. Transac Code	ection (8)	5.	rative rities ired rosed) . 3,	6. Date Exer and Expirati (Month/Day	cisable on Date	· ′	Fitle and Amount Underlying curities		9. Number o Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Owners (y: (Instr. 4 D) ect
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	\$ 0	06/20/2012	06/25/2012	2 A		17		(1)	(1)	Common Stock, par value \$0.01 per share		\$ 0	5,759 (2)	D	
Restricted Stock Units	\$ 0	06/20/2012	06/25/2012	2 A		12		(1)	(1)	Common Stock, par value \$0.01 per share	12	\$ 0	4,078 (3)	D	
Restricted	\$ 0	06/20/2012	06/25/2012	2 A		11		(1)	<u>(1)</u>	Common Stock, par value		\$ 0	3,559 (4)	D	

Reporting Owners

	Relationships				
	Director	10% Owner	Officer	Other	
Reporting Owner Name / Address					

Attinella Michael C/O HSN, INC.		CAO	
1 HSN DRIVE		CAO	
ST. PETERSBURG, FL 33729			

Signatures

/s/ Linda C. Frazier, as attorney-in-fact	06/26/2012
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) The rights accrued when and as the cash dividends were reinvested in securities and are exercisable and expire on the same terms as the securities to which they relate.
- (2) Represents 5,703 restricted stock units ("RSUs") originally granted on February 23, 2010, along with additional RSUs issued in connection with subsequently declared cash dividends
- (3) Represents 4,038 RSUs originally granted on February 9, 2011, along with additional RSUs issued in connection with subsequently declared cash dividends.
- (4) Represents 3,537 RSUs originally granted on February 21, 2012, along with additional RSUs issued in connection with subsequently declared cash dividends.

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.