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)																		
1. Name and Address of Reporting Person* BOUSQUET CHAVANNE PATRICK					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				
C/O HSN,	3. Date of Earliest Transaction (Month/Day/Year) 12/19/2012											ive title below)		ther (specify be	low)				
(Street) ST. PETERSBURG, FL 33729													_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) (State) (Zip)					Table I - Non-Derivative Securities Acquir								uired	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			, if (4. Securities A (A) or Dispose (Instr. 3, 4 and		ed of (D) Ov (5) Tr		Owned Following Reported Transaction(s)		6. Ownership Form:	Beneficial			
				(IVIO	ontil/ Da	y/ 1 e	zai)	Code	e	V	Amou	(A) (a) (D)		(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common S per share	Stock, par	value \$0.01	12/19/2012					A			118	A	\$ 0	36	,141 <u>(1)</u>			D	
	2.	3. Transaction	3A. Deemed Execution Date	Deriv (e.g.,	vative S puts, ca 4. Transact	Secu alls,	5. Num of Deri Secu Acq (A) Disp of (I	s Acquerants, on the second se	Per continued, option (Mc	erso onta orm o , Dis ons, o Date l Exp	ons wained displayed posed conve	in this for ays a cult of, or Bortible second isable in Date	orm are rrently eneficial urities)	e not valid Uy Or e and derlyities	required d OMB co wned Amount	8. Price of Derivative Security (Instr. 5)	nd unless t	of 10. Owners Form o Oerivat Security Direct (or Indir	Ownersh (Instr. 4) D) ect
					Code	V	(A)	(D)	Dat Exe	e ercisa		Expiration Date	Title		Amount or Number of Shares				
Restricted Stock Units	\$ 0	12/19/2012			A		10			<u>(2)</u>	1	(2)	Com Sto par v \$0.01 sha	ck, alue per		\$ 0	3,164 (3) D	
Restricted Stock Units	\$ 0	12/19/2012			A		8			(2)	l.	(2)	Com Sto par v \$0.01 sha	ck, alue per	8	\$ 0	2,735 (4	D	

Reporting Owners

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

Signatures

/s/ Linda C. Frazier, as attorney-in-fact	12/21/2012		
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) Includes 73 shares and 45 deferred share units issued to the reporting person in connection with the reinvestment of cash dividends declared by the company effective December 19, 2012.
- (2) 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.
- (3) Represents 3,116 restricted stock units ("RSUs") originally granted May 17, 2011, along with additional RSUs issued in connection with subsequently declared cash dividends.
- (4) Represents 2,712 RSUs originally granted May 18, 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.