## FORM 4

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

OMB APPR	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre par raenones	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

1 Nor 1	e Responses)														
1. Name and Address of Reporting Person* Sarnoff Ann			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) 03/20/2013						_	Officer (g	ive title below)	Ot	ner (specify be	low)	
(Street) SAINT 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  lired, Disposed of, or Beneficially Owned					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui										ies Acquire	
(Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, r) (Month/Day/Ye		f Code (Instr	nsaction 8)	(A) or Dispos		1 of (D) Ov 5) Tra (In	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I)	Beneficial Ownership		
						Co	de V	Amount	(D)	Price				(Instr. 4)	
1. Title of	Title of 2. 3. Transaction 3A. Executive Conversion Date Executive or Exercise (Month/Day/Year) any			(e.g., puts, calls, warrants,  4. 5. Transaction Code of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			form uired, Di	and Expiration Date (Month/Day/Year) of Unde Securition			ty Owned  and Amount Berrice Courtying Court Security Security		nd unless t	Ownership Form of Derivative Security: Direct (D) or Indirect	
Derivative Security (Instr. 3)	or Exercise Price of Derivative	Date		, if Transact		Derivative Securities Acquired A) or Disposed of (D) Instr. 3,	and Ex (Month	piration D	ate	7. Title and of Underly Securities (Instr. 3 an	ing		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir (s) (I)	Beneficia Ownersh (Instr. 4)
Security	or Exercise Price of Derivative	Date	Execution Date any	, if Transact	(i (i (i 4	Derivative Securities Acquired A) or Disposed of (D)	and Ex (Month	piration D	ate ration	of Underly Securities	ing	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivat Security Direct ( or Indir (s) (I)	hip of Indired Beneficia Ownersh (Instr. 4)  D)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Sarnoff Ann C/O HSN, INC. 1 HSN DRIVE SAINT PETERSBURG, FL 33729	X					

#### **Signatures**

/s/ Linda C. Frazier, as attorney-in-fact	03/22/2013
**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 1,825 restricted stock units ("RSUs") originally granted December 19, 2012, along with RSUs issued in connection with the reinvestment of cash dividends declared by the company effective March 20, 2013.

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.