FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours 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 Ty	pe Response	s)																
1. Name and Address of Reporting Person * MORSE JOHN B JR					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) 06/30/2013								-	Office	r (give title belo	w)	Other (specify	pelow)
(Street)				4. If A	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. PETI	ERSBURG	G, FL 33729	9												d by More than	One Reporting	CISOII	
(City)	(State)	(Zip)			Ta	able I	- Non	-Deri	ivative S	Securitie	es Ac	cquir	ed, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (Instr. 8)		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D) l	Reported Transaction(s)		ollowing	Form:	7. Nature of Indirect Beneficial		
						ode	V	Amount	(A) or t (D)	Pri		(Instr. 3 a	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common \$0.01 per	Stock, pa	r value	06/30/2013				A	(1)		84	· ` ´	\$ 53.	.72	51,650	(2)		D	
			Table II -					1 quire	he f	orm dis	splays a	a cui	rrent	tly valid		spond unle rol numbe		
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Day any	ate, if	4. Transaction Code Year) (Instr. 8)		5.		6. Da and I	ate Exerc Expiration	te Exercisable Expiration Date th/Day/Year)		7. Titl Amou Under Secur	le and int of rlying ities . 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficial Ownershij (Instr. 4)
				(Code	V	(A)		Date Exer		Expiration Date	on T	Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MORSE JOHN B JR C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729	X						

Signatures

/s/ Linda C. Frazier, as attorney-in-fact	07/02/2013
**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) Represents share units accrued for the quarter ended June 30, 2013 under the Non-Employee Director Deferred Compensation Plan.
- (2) Represents (i) 48,038 shares of common stock and (ii) 3,612 deferred share units.

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.