FORM 4

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

OMB APPR	OVAL
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houre par rachanca	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(Print or Type Responses)

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 Name an															
1. Name and Address of Reporting Person* FOLLO JAMES M		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							
1 HSN D		(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015			-	Officer (give t	itle below)	Other (specify below)				
(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 lired, Disposed of, or Beneficially Owned							
ST. PETERSBURG, FL 33729 (City) (State) (Zip)															
			_								•				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/		Execu any	y	Date, if Co		(A)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		O Fo	Ownership of Form:	Nature Indirect eneficial
				(Mon	ith/D	ay/Year)	Code	V An	(A) c	or	(Instr. 3 and 4)		or (I	or Indirect (Instr. 4)	Ownership Instr. 4)
Reminder:	Report on a s	eparate line for each	class of securities o		11, 0,	whea ancen	<i>.</i>				collection of				174 (9-02)
Reminder:	Report on a s	eparate line for each		- Deriva	ative	Securities	Acqui	in this fo a current red, Dispose	rm are not ly valid ON ed of, or Ber	required t IB control neficially O	o respond ui number.		n contained orm displays		174 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., p 4. Transact Code	ative outs, tion	Securities	Acqui ants, o of	in this fo a current red, Dispose	rm are not ly valid ON ed of, or Ber vertible secu crcisable ion Date	required to the control of the contr	orespond unnumber. wned d Amount of g Securities	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur p of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., p 4. Transact Code	ative outs, tion	5. Number Derivative Securities Acquired (, Disposed o (Instr. 3, 4,	Acqui ants, o of	in this fo a current red, Dispose ptions, conv 6. Date Exe and Expirat	rm are not ely valid ON ed of, or Ber vertible secu- creisable ion Date y/Year)	required to the ficially Orities) 7. Title and Underlying	orespond unnumber. wned d Amount of g Securities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur p of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
FOLLO JAMES M						
1 HSN DRIVE	X					
ST. PETERSBURG, FL 33729						

Signatures

/s/ Harold Herman, as attorney-in-fact	02/19/2015
**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.

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.