# FORM 4

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

OMB APPROVAL
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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 Ty	pe Response	s)														
1. Name and Address of Reporting Person *- GROSSMAN MINDY F				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) 03/05/2015							X Officer (give title below) Other (specify below)  CEO					
(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					
		G, FL 33729											a of more man	one reporting	- Cison	
(City	·)	(State)	(Zip)		Ta	able I -	Non-	-Deri	vative Securities Acquired, Disposed of, or Beneficially Owned				Owned			
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	any	tion Date, if	Code (Instr. 8)			4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficial Reported	nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	Beneficial
			(Month/Day/Year)		Coo	de	V	Amoun	(A) or (D)	Price	(Instr. 3 ar	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Commor \$0.01 pe	Stock, pa	r value	03/05/2015			G		V	5,000	D	\$ 0	119,090	.499		D	
				Derivative S			t uired	he fo	orm dis	splays a o	curre eficial	ntly valid	iired to res OMB cont	•		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of		n 3A. Deemed Execution Da	Code	action	5. Number of Deriva	er	6. Da and I	convert ate Exerc Expiration th/Day/	cisable on Date	7. T	itle and ount of erlying		9. Number Derivative Securities	of 10. Owners Form of	

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GROSSMAN MINDY F C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729	X		CEO			

## **Signatures**

/s/ Harold Herman, as attorney-in-fact	03/09/2015
**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).

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.