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 Type Re	esponses)														
1. Name and Address of Reporting Person * Brand William C			2. Issuer Name and Ticker or Trading Symbol HSN, Inc. [HSNI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O HSN, INC., 1 HSN DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/16/2016					_X_0	X_ Officer (give title below) Other (specify below) President, HSN					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ For	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. PETERS		(State)	(Zip)	Table I - Non-Derivative Securities Acqu						A consisted D	ived Disposed of an Ponoficially Owned				
1.Title of Securi	ity		2. Transaction	2A. Dee	med			ı	ecurities Acquir			curities Ben	-		7. Nature
(Instr. 3) Date (Month/Day/Yea			Execution Date, if		te, if Coc (Ins	(Instr. 8)		or Disposed of tr. 3, 4 and 5)	(D) Owned Transa	O) Owned Following Reported Transaction(s) (Instr. 3 and 4)		C	wnership orm:	of Indirect Beneficial Ownership	
					Code V		(A) or ount (D)	Price (Instr.	0			Indirect (In			
Reminder: Repo	rt on a separa	te line for each cla	ass of securities be	eneficially of	wne	d directly	or inc	directly.							
								in this for	vho respond m are not req y valid OMB o	uired to res	spond ur				1474 (9-02)
			Table II						d of, or Benefic ertible securiti		l				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date any (Month/Day/Y	Code			ative es d (A) esed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners: Form of Derivati Security Direct (1 or Indirect)	ve Ownersh (Instr. 4) D)
				Code	· V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)
Stock Appreciation Rights	\$ 44.86	02/16/2016		A		53,352		(1)	02/16/2026	Common Stock, par value \$0.01 per share		\$ 0	53,352	D	
Restricted Stock Units	<u>(2)</u>	02/16/2016		A		4,347		(3)	(3)	Common Stock, par value \$0.01 per share		\$ 0	4,347	D	
Performance Share Units	<u>(4)</u>	02/16/2016		A		7,215		(4)	(4)	Common Stock, par value \$0.01 per share		\$ 0	7,215	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Brand William C C/O HSN, INC. 1 HSN DRIVE ST. PETERSBURG, FL 33729			President, HSN			

Signatures

/s/ Harold Herman, as attorney-in-fact	02/18/2016	

**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 Stock Appreciation Rights vest annually, in equal installments, over a three-year period beginning on February 16, 2017.
- (2) Each Restricted Stock Unit represents a contingent right to receive one share of HSN, Inc. common stock.
- (3) All of such Restricted Stock Units vest on February 16, 2019. Shares will be delivered on a one-for-one basis.
 - The number of performance share units("PSUs") reported represents the "target" number of PSUs. Each PSU represents a contingent right to receive 0-200% of that number in shares of HSN,
- (4) Inc. common stock. The PSUs vest upon continued employment and achievement of specified thresholds of total shareholder return (TSR) compared to certain peers measured on December 31, 2018, as set forth in the award agreement. The award vests after the performance results are certified by the Compensation and Human Resources Committee.

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.