MOVE INC Form SC 13G/A February 13, 2007

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

SCHEDULE 13G

Under the Securities exchange Act of 1934

HOMESTORE INC
(NAME OF ISSUER)
COM
(TITLE OF CLASS OF SECURITIES)
437852106
(CUSIP NUMBER)
December 31, 2006
(Date of event which requires filing of this Statement)

NOTE: A MAJORITY OF THE SHARES REPORTED IN THIS SCHEDULE 13G ARE HELD BY UNAFFILIATED THIRD-PARTY CLIENT ACCOUNTS MANAGED BY ALLIANCE CAPITAL MANAGEMENT L.P., AS INVESTMENT ADVISER. (ALLIANCE CAPITAL MANAGEMENT L.P. IS A MAJORITY-OWNED SUBSIDIARY OF AXA FINANCIAL, INC.)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- X Rule 13d-1(b)
 Rule 13d-1(c)
 Rule 13d-1(d)
- * The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be 'filed' for the purpose of Section 18 of the Securities Exchange Act of 1934 ('Act') or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

(CONTINUED ON FOLLOWING PAGE(S))

	13G				of 12 Pages			
1.	. NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON							
	AXA Assurances I.A.R.D. Mutuelle							
2.	. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP * (A) [X] (B) []							
3.	. SEC USE ONLY							
4.	. CITIZENSHIP OR PLACE OF ORGANIZATION France							
	NUMBER OF SHARES BENEFICIALLY	5.	SOLE VOTING POWER	0				
	OWNED AS OF December 31, 2005	6.	SHARED VOTING POWER	0				
	•	7.	SOLE DISPOSITIVE POWER	0				
		8.	SHARED DISPOSITIVE POWER	0				
9.	. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH 0 REPORTING PERSON (Not to be construed as an admission of beneficial ownership)							
10.	. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES *							
11.	PERCENT OF CLASS REPRE	SENTED	BY AMOUNT IN ROW 9	0.0%				
12.	. TYPE OF REPORTING PERSON *							
	* SEE I	NSTRUC	TIONS BEFORE FILLING OUT!					
			13G	Page 3 of	f 12 Pages			
1.	. NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON							
	AXA Assurances Vie Mutuelle							
2.	2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP * (A) [X] (B) []							
3.	SEC USE ONLY							
4.	CITIZENSHIP OR PLACE OF	F ORGA	NIZATION					
	NUMBER OF SHARES BENEFICIALLY	5.	SOLE VOTING POWER	0				
		6.	SHARED VOTING POWER	0				

	REPORTING		SOLE DISPOSITIVE POWER			
	PERSON WITH:	8.	SHARED DISPOSITIVE POWER	0		
9.	AGGREGATE AMOUNT BENEF			0		
	(Not to be construed as	s an	admission of beneficial own	nership)		
10.	CHECK BOX IF THE AGGREG SHARES *	GATE	AMOUNT IN ROW (9) EXCLUDES	CERTAIN		
11.	PERCENT OF CLASS REPRE	SENTE	D BY AMOUNT IN ROW 9	0.0%		
12.	TYPE OF REPORTING PERSO	ON *				
	* SEE I	NSTRU	JCTIONS BEFORE FILLING OUT!			
			13G	Page 4 of 12 Pages		
1.	NAME OF REPORTING PERSONS.S. OR I.R.S. IDENTIF		ON NO. OF ABOVE PERSON			
	AXA Courtage Assurance Mutuelle					
2.	CHECK THE APPROPRIATE	BOX I	F A MEMBER OF A GROUP *	(A) [X] (B) []		
3.	SEC USE ONLY					
4.	CITIZENSHIP OR PLACE OF	F ORG	SANIZATION			
	NUMBER OF SHARES BENEFICIALLY	5.	SOLE VOTING POWER	0		
	OWNED AS OF	6.	SHARED VOTING POWER	0		
	December 31, 2005 BY EACH REPORTING	7.	SOLE DISPOSITIVE POWER	0		
	PERSON WITH:	8.	SHARED DISPOSITIVE POWER	0		
9.	AGGREGATE AMOUNT BENEF REPORTING PERSON	ICIAI	LLY OWNED BY EACH	0		
	(Not to be construed as	s an	admission of beneficial own	nership)		
10.	CHECK BOX IF THE AGGREG SHARES *	GATE	AMOUNT IN ROW (9) EXCLUDES	CERTAIN		
11.	PERCENT OF CLASS REPRE	SENTE	CD BY AMOUNT IN ROW 9	0.0%		
12.	. TYPE OF REPORTING PERSON * IC					
	* SEE I	NSTRU	UCTIONS BEFORE FILLING OUT!			

13G

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1.	. NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON					
	AXA					
2.	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP * (A) [] (B) []					
3.	SEC USE ONLY					
4.	CITIZENSHIP OR PLACE OF ORGANIZATION France					
	BENEFICIALLY OWNED AS OF December 31, 2005 BY EACH	5. SOLE VOTING POWER	0			
		6. SHARED VOTING POWER	0			
		7. SOLE DISPOSITIVE POWER	0			
	REPORTING PERSON WITH:	8. SHARED DISPOSITIVE POWER	0			
9.	AGGREGATE AMOUNT BENEF	CICIALLY OWNED BY EACH	0			
	REPORTING PERSON (Not to be construed a	s an admission of beneficial own	nership)			
10.). CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES *					
11.	. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.0%					
	I DITODITI OF OBLIDO INDITE	DENTED BY THIOUNT IN NOW 5	0.00			
12.	TYPE OF REPORTING PERS		0.0%			
12.	TYPE OF REPORTING PERS		0.0%			
12.	TYPE OF REPORTING PERS	ON *	Page 6 of 12 Pages			
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	TYPE OF REPORTING PERSIC * SEE I	ON * INSTRUCTIONS BEFORE FILLING OUT! 13G ON CICATION NO. OF ABOVE PERSON				
1.	TYPE OF REPORTING PERS IC * SEE I NAME OF REPORTING PERS S.S. OR I.R.S. IDENTIF AXA Financial, Inc.	ON * INSTRUCTIONS BEFORE FILLING OUT! 13G ON CICATION NO. OF ABOVE PERSON				
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 2. 3. 	TYPE OF REPORTING PERS IC * SEE I NAME OF REPORTING PERS S.S. OR I.R.S. IDENTIF AXA Financial, Inc. CHECK THE APPROPRIATE	INSTRUCTIONS BEFORE FILLING OUT! 13G SON CICATION NO. OF ABOVE PERSON 13-3623351 BOX IF A MEMBER OF A GROUP *	Page 6 of 12 Pages (A) []			
 2. 3. 	TYPE OF REPORTING PERSIC * SEE I NAME OF REPORTING PERS S.S. OR I.R.S. IDENTIF AXA Financial, Inc. CHECK THE APPROPRIATE SEC USE ONLY CITIZENSHIP OR PLACE OF State of Delaware NUMBER OF SHARES	INSTRUCTIONS BEFORE FILLING OUT! 13G SON CICATION NO. OF ABOVE PERSON 13-3623351 BOX IF A MEMBER OF A GROUP *	Page 6 of 12 Pages (A) []			
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REPORTING

PERSON WITH: 8. SHARED DISPOSITIVE POWER 0

9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH 0

REPORTING PERSON

(Not to be construed as an admission of beneficial ownership)

- 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES *
- 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.0%
- 12. TYPE OF REPORTING PERSON *

* SEE INSTRUCTIONS BEFORE FILLING OUT!

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Item 1(a) Name of Issuer:

Item 1(b) Address of Issuer's Principal Executive Offices:

Item 2(a) and (b)

Name of Person Filing and Address of Principal Business Office:

AXA Assurances I.A.R.D Mutuelle, and AXA Assurances Vie Mutuelle, 26, rue Drouot 75009 Paris, France

AXA Courtage Assurance Mutuelle 26, rue Drouot 75009 Paris, France

as a group (collectively, the 'Mutuelles AXA').

AXA

25, avenue Matignon 75008 Paris, France

AXA Financial, Inc. 1290 Avenue of the Americas New York, New York 10104

(Please contact Dean Dubovy at (212) 314-5528 with any questions.)

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	Mutuelles AXA and AXA - France AXA Financial, Inc Delaware	
Item 2(d)	Title of Class of Securities:	
	COM	
Item 2(e)	Cusip Number: 437852106	
Item 3.	Type of Reporting Person: AXA Financial, Inc. as a parent holding companin accordance with 240.13d-1(b)(ii)(G).	У,
	The Mutuelles AXA, as a group, acting as a par	ent holding company.
	AXA as a parent holding company.	
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	wnership as of a) Amount Beneficially Owned:	
		No. of Shares
	S	ubtotals
	-	
71 5 7 71		0
AXA		0
AXA Entit	y or Entities	0
		0
	cial, Inc.	0
Subsidiar	ies:	
Total		0
		========
filing of	he Mutuelles AXA, as a group, and AXA expressly this Schedule 13G shall not be construed as an ses of Section 13(d) of the Exchange Act, the b	admission that it is,

filing of this Schedule 13G shall not be construed as an admission that it is, for purposes of Section 13(d) of the Exchange Act, the beneficial owner of any securities covered by this Schedule 13G.

Each of the above subsidiaries of AXA Financial, Inc. operates under independent management and makes independent decisions.

(b) Percent of Class: 0.0%

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ITEM 4. Ownership as of

(CONT.)

(c) Deemed Voting Power and Disposition Power:

	(i)	(ii)	(iii)	(iv)
	Deemed	Deemed	Deemed	Deemed
	to have	to have	to have	to have
	Sole Power	Shared Power	Sole Power	Shared Power
	to Vote	to Vote	to Dispose	to Dispose
	or to	or to	or to	or to
	Direct	Direct	Direct the	Direct the
	the Vote	the Vote	Disposition	Disposition
The Mutuelles AXA,				
as a group	0	0	0	0
AXA	0	0	0	0
AXA Entity or Entities:				
AXA Financial, Inc.	0	0	0	0
Subsidiaries:				
	0	0	0	0
==	=======================================		========	=========

Each of the above subsidiaries of AXA Financial, Inc. operates under independent management and makes independent voting and investment decisions.

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Item 5. Ownership of Five Percent or Less of a Class: If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following.

- Item 6. Ownership of More than Five Percent on behalf of Another Person. N/A
- Item 7. Identification and Classification of the Subsidiary which Acquired the Security Being Reporting on by the Parent Holding Company:

This Schedule 13G is being filed by AXA Financial, Inc.; AXA, which owns AXA Financial, Inc.; and the Mutuelles AXA, which as a group control AXA:

- () in the Mutuelles AXAs' capacity, as a group, acting as a parent holding company with respect to the holdings of the following AXA entity or entities:
- () in AXA's capacity as a parent holding company with respect to the holdings of the following AXA entity or entities:

- (X) in AXA Financial, Inc.'s capacity as a parent holding company with respect to the holdings of the following subsidiaries:
- (X) AllianceBernstein L.P. (13-3434400), an investment adviser registered under Section 203 of the Investment Advisers Act of 1940.
- (X) AXA Equitable Life Insurance Company (13-5570651), an insurance company and an investment adviser registered under Section 203 of the Investment Advisers Act of 1940.

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- Item 8. Identification and Classification of Members of the Group. N/A
- Item 9. Notice of Dissolution of Group:

N/A

Item 10. Certification:

By signing below I certify that to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 14, 2007 AXA FINANCIAL, INC.*

/s/ Alvin H. Fenichel

Alvin H. Fenichel Senior Vice President and Controller

^{*}Pursuant to the Joint Filing Agreement with respect to Schedule 13G

attached hereto as Exhibit I, among AXA Financial, Inc., AXA Assurances I.A.R.D Mutuelle, AXA Assurances Vie Mutuelle, AXA Courtage Assurance Mutuelle, and AXA, this statement Schedule 13G is filed on behalf of each of them.