FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* REBROVICK LINDA						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) 5202 CL	(Fi	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/19/2018									Officer below)	(give title		Other (s below)	specify
(Street) NASHVILLE TN 37205					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
			le I - Noi			_			'	Dis	1							1.	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ay/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	nount (A) or (D)		rice	Transaction(c)				(111341.4)
Common Stock 03/19					9/2018	2018			М		2,846 ⁽¹⁾ A \$		\$0.00	34	34,852		D		
		Т	able II -						uired, D s, optior						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Insti 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Year			Amount Securiti Underly Derivati	. Title and amount of iecurities Inderlying Ierivative Security Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly i	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Ame or Nun of Sha						
Restricted Share Units	\$0.00 ⁽²⁾	03/19/2018			М			849	(3)		(4)	Common Stock	84	49	\$0.00	0		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/19/2018			M			1,075	(5)		(4)	Common Stock	1,0)75	\$0.00	1,074		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/19/2018			M			922	(6)		(4)	Common	92	22	\$0.00	1,844		D	

Explanation of Responses:

- 1. Shares acquired on vesting of restricted share units.
- 2. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 3. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 10, 2016 in three equal installments.
- 5. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 17, 2017 in three equal installments.
- 6. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 16, 2018 in three equal installments.

Remarks:

Linda Rebrovick

** Signature of Reporting Person Date

03/19/2018

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.