FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burd | en | | | | |
| hours per response: | 0.5 | | | | |

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

| 1. Name and Address of Reporting Person* Coady Trisha L (Last) (First) (Middle) 500 11TH AVENUE NORTH | | | | | 3. E | 2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM] 3. Date of Earliest Transaction (Month/Day/Year) 12/14/2020 | | | | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Senior Vice President | | | | | |
|--|---|--|--|------------------------|-----------------|--|----------|-----|---|------------|--------------------------------|-----------------|-------------------------|---|---|---|--|---------------------------------------|------------|--|
| (Street) NASHV | ILLE TI | | 37203 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | | Execution Date, | | | | ities Acquired (A) o d Of (D) (Instr. 3, 4 | | | | es ally Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Reported Transact (Instr. 3 | ction(s) | | | (Instr. 4) | |
| Common Stock 12/14/2 | | | | | 1/2020 | 2020 | | М | | 700(1 |) A | . ; | \$0.00 | 7, | ,548 | | D | | | |
| Common Stock 12/14/2 | | | | 1/2020 | 2020 | | F | | 171(2 |) <u> </u> | 9 | \$20.26 | 5 7, | 7,377 | | D | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, Transa Code (| | | ction of | | 6. Date Exercisabl Expiration Date (Month/Day/Year) | | ole and 7. Title and Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly G | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | | Date Exercisabl | | xpiration ate | Title | or Nu of | ount mber ares | | | | | | |
| Restricted Share Units | \$0.00 ⁽³⁾ | 12/14/2020 | | | M | | | 700 | (4) | | (5) | Commor Stock | 7 | 00 | \$0.00 | 2,275 | | D | | |

Explanation of Responses:

- 1. Shares acquired on vesting of restricted share units
- 2. Shares withheld for payment of tax liability.
- 3. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 4. The RSU's are subject to a four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on December 14, 2019, 20% vest on December 14, 2020, 30% vest 14, 2021, and the remaining 35% vest on December 14, 2022.
- 5. Not applicable.

Remarks:

Trisha L. Coady

12/14/2020

** Signature of Reporting Person

Date

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.