FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	DC	20549
vvasilington,	D.C.	20040

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

					OI.	Section	11 30(1	1) 01 111	, iiivcsti	ilicit (Joinparty Act	01 1340								
1. Name and Address of Reporting Person* <u>HARRIS C MARTIN</u>						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 209 10TH AVE. SOUTH SUITE 450				03	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018									Officer (give title below)			Other (specify below)			
(Street) NASHVILLE TN 37203				- 4.	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						
(City) (State) (Zip)					-							Person								
		Tab	le I - I	Non-Deri	vativ	e Sec	urit	ies A	cquire	ed, D	isposed o	of, or B	enefic	ially	Owned	l				
Date			2. Transact Date (Month/Day		Execu Year) if any					s Acquired (A) or f (D) (Instr. 3, 4 and		Benet		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(mour 4)	
Common				03/01/2)18					11,250	A	\$5.		20,815		D			
Common				03/01/2018				M		15,000	A	\$12			,815	D				
Common	Stock			03/01/2					S		10,452	_ D	\$24.0			,363		D		
		7	able	II - Deriva (e.g.,	atıve puts,	Secu calls	ritie , wa	s Acc rrant	quired s, opt	i, Dis	posed of , converti	, or Be ble se	neficia curitie	ally O s)	wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) i	Execu	3A. Deemed Execution Date, if any (Month/Day/Year)		4, Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Ily Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amor or Numl of Share	ber						
Employee Stock Option (right to buy)	\$5.99	03/01/2018			M			3,750	10/25	/2011	10/25/2018	Commo Stock	n 3,75	50	\$0.00	0		D		
Employee Stock Option (right to buy)	\$5.99	03/01/2018			М			3,750	10/25	/2012	10/25/2018	Commo Stock	n 3,75	50	\$0.00	0		D		
Employee Stock Option (right to buy)	\$5.99	03/01/2018			M			3,750	10/25	/2013	10/25/2018	Commo Stock	3,75	50	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	03/01/2018			М			5,000	05/26	/2012	05/26/2019	Commo Stock	ⁿ 5,00	00	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	03/01/2018			M			5,000	05/26	/2013	05/26/2019	Commo Stock	ⁿ 5,00	00	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	03/01/2018			М			5,000	05/26	/2014	05/26/2019	Commo Stock	ⁿ 5,00	00	\$0.00	0		D		

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$23.9310 to \$24.0685. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

Remarks:

** 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.