FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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*  Schultz Thomas  (Last) (First) (Middle)  209 10TH AVE. SOUTH  SUITE 450						Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]      Include the state of Earliest Transaction (Month/Day/Year)     103/20/2017										heck all app Direct X Office below	onship of Reporting Person(s) to Issuer applicable) Director 10% Owner Officer (give title Other (specify below) Senior Vice President				
(Street) NASHVILLE TN 37203  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)										ne) X Form Form					
1. Title of \$	cquired, Disposed of, or Benefi  3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3,						(A) or	5. Amo	unt of		7. Nature of Indirect										
Date (Month/D						ar)   i	Execution Date, if any (Month/Day/Year)		ar)	Code (Ir 8)	ode (Instr. )		5)			Benefic Owned Reporte	Beneficially Owned Following Reported Transaction(s)		or Indirect nstr. 4)	Beneficial Ownership (Instr. 4)	
Common Stock 03/20/2							2017			Code M	v	1.178 <sup>(1)</sup>		A	Price \$0.0	(Instr. 3			D		
Common				03/20		-			$\dashv$	F		385	-	D	\$23		,134	D			
		Т		Derivat (e.g., p												y Owned		,			
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,	4. Transactio Code (Insti				6. Date Exercisa Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		epiration	Title	or Nu of	ımber						
Restricted Share Units	\$0.00 <sup>(3)</sup>	03/20/2017			M			604		(4)		(5)	Comm Stocl		504	\$0.00	1,963		D		
Restricted Share	\$0.00 <sup>(3)</sup>	03/20/2017			M			574		(6)		(5)	Comm		574	\$0.00	3,252		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 March 10, 2016, 20% vest on March 10, 2017, 30% vest on March 10, 2018, and the remaining 35% vest on March 10, 2019.
- 5. Not applicable.

Units

6. The RSU's are subject to a four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on March 17, 2017, 20% vest on March 17, 2018, 30% vest on March 17, 2019, and the remaining 35% vest on March 17, 2020.

## Remarks:

**Thomas Schultz** 03/21/2017 \*\* 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.