FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL					
OMB Number:	3235-0287					
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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

1. Name and Address of Reporting Person* SHMERLING MICHAEL D						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]										ationship all appli Directo	•		son(s) to Iss		
(Last) 618 CHU	(Fi	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/30/2012											(give title		Other (s below)	specify	
SUITE 200 (Street) NASHVILLE TN 37219					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)													Persor	I				
		Tab	le I - No	n-Deriv	ative/	Se	curiti	ies Ad	qui	ired, D	isp	osed c	of, or Be	eneficia	lly	Owned	I				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution D			•,	3. Transacti Code (Ins 8)	ion Dispose		ties Acqui d Of (D) (In		Benefici Owned F		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									•	Code V	<i>,</i>	Amount	(A) (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 05/30/2					0/2012	2012				М		6,000) A	\$2.	99	112	2,137		D		
		7	able II -										, or Ben ble sec			wned				•	
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. Transaction Code (Instr. 8)		of Deri Sec Acq (A) o Disp of (I	oosed D) tr. 3, 4	Exp	ate Exerc piration D nth/Day/	ate	Amount o		of s ng e Security		Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i illy	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	Ex Da	piration ate	Title	Amount or Number of Shares							
Employee Stock Option (right to buy)	\$2.99	05/30/2012			М			6,000	05/	/29/2008	05	/29/2018	Common Stock	6,000		\$0.00	0		D		

Explanation of Responses:

Remarks:

Michael Shmerling

05/30/2012

** 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.