FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							

0.5

hours per response:

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* <u>DENT THOMPSON</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) 1707 OL	`	irst) ORO ROAD	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2018								Officer below)	(give title		Other (below)	specify		
(Street)	LIN T	N TN 37064				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) (State) (Zip)													Person							
		Tab	le I - No	n-Deriv	/ative	e Se	ecurit	ies A	cquired,	Dis					y Owned	ı				
			2. Transa Date (Month/I		Execution		ion Date	Code	Transaction Dispo		Securities Acquired (Asposed Of (D) (Instr. 3,			Securiti Benefici Owned I	5. Amount of Securities Beneficially Owned Following Reported		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or D)	Price	Transac (Instr. 3	tion(s)			(11341.4)		
Common	Stock			02/27/2018		3			M		6,000		A	\$2.99	83	,700	D			
Common				02/27/2018		-			M		15,00	15,000 A		\$4.66		08,700		D		
Common	Stock			02/27					M		15,00		A	\$12.23		3,700		D		
		T	able II -								osed of converti				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/Day	Date,	4. Transaction Code (Instr 8)		on of E		Expiration	5. Date Exercisable a Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	i F ly D (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	OI N Of	umber						
Employee Stock Option (right to buy)	\$2.99	02/27/2018			M			6,000	05/29/20)8 (05/29/2018	Comr		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$4.66	02/27/2018			M			5,000	06/28/20	11 (06/28/2018	Comr		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$4.66	02/27/2018			M			5,000	06/28/20	12 (06/28/2018	Comr		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$4.66	02/27/2018			M			5,000	06/28/20	13 (06/28/2018	Comr		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	02/27/2018			M			5,000	05/26/20	12 (05/26/2019	Comr		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	02/27/2018			M			5,000	05/26/20	13 (05/26/2019	Comr Stoo		5,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$12.23	02/27/2018			M			5,000	05/26/20	14 (05/26/2019	Comr		5,000	\$0.00	0		D		

Explanation of Responses:

Remarks:

Thompson Dent

02/28/2018

** 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.