FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 2	0549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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* MCLAREN JEFFREY L						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]										Relationship eck all appli X Directo	cable)	ing Person(s) to Issuer 10% Owner			
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 03/25/2024										Officer below)	(give title		Other (s	specify		
500 11TH AVENUE NORTH SUITE 1000					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					
(Street) NASHV	ILLE T	N :	37203		L											Form f Persor		re thar	n One Repo	rting	
(City)	(S	tate)	(Zip)		- Ru	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													d to		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,			, Ti C	Transaction Disposed Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								С	ode	v	Amount	Amount (A) or (D)		Price	Transac	Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock Holding 03/25/				5/2024	/2024			M		2,092 ⁽¹⁾ A		\$ <mark>0</mark>	18	18,194		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,	4. Transaction Code (Instr. 8)				6. Date Exercis: Expiration Date (Month/Day/Yea		Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	derivative Securitie	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer) rcisable		xpiration ate	Title	or Nu of	nount imber ares						
Restricted Share Units	\$0 ⁽²⁾	03/25/2024			M			944		(3)		(4)	Commo Stock	n g	944	\$0	0		D		
Restricted Share Units	\$0 ⁽²⁾	03/25/2024			М			1,148		(5)		(4)	Commo Stock	n 1,	,148	\$0	1,149	,	D		

Explanation of Responses:

- 1. Shares acquired on vesting of restricted share units.
- 2. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 3. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 17, 2022 in three equal installments.
- 4. Not applicable
- 5. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 23, 2023 in three equal installments.

/s/ Jeffrey McLaren

03/25/2024

** 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.