FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Coady Trisha L			2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]								(Ch	Officer (eige title			10% O	to Issuer % Owner her (specify			
(Last) (First) (Middle) 500 11TH AVENUE NORTH SUITE 1000				3. Date of Earliest Transaction (Month/Day/Year) 08/17/2020									X Officer (give title Officer (below) below) Senior Vice President				эрсону		
(Street) NASHV	ILLE T	N	37203		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)																
		Tab	le I - No	n-Deriv	ative	Sec	urities	Acq	uired,	Dis	posed o	of, o	r Ber	eficia	lly Owned	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,		Transaction Disp Code (Instr. 5)		Disposed	ecurities Acquired (A) o posed Of (D) (Instr. 3, 4			Benefic Owned	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount		(A) or (D)	Price		saction(s) r. 3 and 4)			(Instr. 4)		
Common Stock 08/17			08/17/	/2020		M		1,963(1)		A	\$0.0	0 7,	7,326		D				
Common Stock 08/17		/2020				F		478(2)		D	\$22.1	14 6,	6,848		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. Fransa Code (3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	re (f	i. Date Ex Expiration Month/Da	Date		Amo Sec Und Deri			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Shares acquired on vesting of restricted share units.

08/17/2020

08/17/2020

2. Shares withheld for payment of tax liability.

\$0.00⁽³⁾

\$0.00⁽³⁾

3. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.

Code

М

M

4. The RSU's are subject to a four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on August 9, 2017, 20% vest on August 9, 2018, 30% vest on August 9, 2019, and the remaining 35% vest on August 9, 2020.

Date Exercisable

(4)

(6)

(A) (D)

1.003

960

Expiration Date

(5)

(5)

Title

Commo

Stock

Commo

Stock

5. Not applicable.

Restricted

Units Restricted

Share 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 August 16, 2018, 20% vest on August 16, 2019, 30% vest on August 16, 2020, and the remaining 35% vest on August 16, 2021.

Remarks:

Trisha L. Coady

08/18/2020

0

1,120

D

D

** Signature of Reporting Person

of Shares

1,003

960

\$0.00

\$0.00

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.