

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
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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>Coady Trisha L</u>  (Last) (First) (Middle) 209 10TH AVENUE SOUTH SUITE 450  (Street) NASHVILLE TN 37203  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 12/14/2018	3. Issuer Name and Ticker or Trading Symbol <u>HEALTHSTREAM INC [ HSTM ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>SVP &amp; GM, Clinical Solutions</u>	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	1,660	D	

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				
Restricted Share Units	(1)	(2)	Common Stock	1,116	0.00 <sup>(3)</sup>	D
Restricted Share Units	(4)	(2)	Common Stock	1,863	0.00 <sup>(3)</sup>	D
Restricted Share Units	(5)	(2)	Common Stock	1,252	0.00 <sup>(3)</sup>	D
Restricted Share Units	(6)	(2)	Common Stock	2,720	0.00 <sup>(3)</sup>	D
Restricted Share Units	(7)	(2)	Common Stock	1,404	0.00 <sup>(3)</sup>	D
Restricted Share Units	(8)	(2)	Common Stock	3,500	0.00 <sup>(3)</sup>	D

**Explanation of Responses:**

- The RSU's are subject to a vesting schedule, contingent upon continued service at the time of vesting. 515 RSU's vest on March 17, 2019, and 601 RSU's vest on March 17, 2020.
- Not applicable.
- Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- The RSU's are subject to a vesting schedule, contingent upon continued service at the time of vesting. 860 RSU's vest on August 9, 2019, and 1,003 RSU's vest on August 9, 2020.
- The RSU's are subject to a vesting schedule, contingent upon continued service at the time of vesting. 295 RSU's vest on March 16, 2019, 442 RSU's vest on March 16, 2020, and 515 RSU's vest on March 16, 2021.
- The RSU's are subject to a vesting schedule, contingent upon continued service at the time of vesting. 640 RSU's vest on August 16, 2019, 960 RSU's vest on August 16, 2020, and 1,120 RSU's vest on August 16, 2021.
- The RSU's are subject to a four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on March 15, 2019, 20% vest on March 15, 2020, 30% vest on March 15, 2021, and the remaining 35% vest on March 15, 2022.
- The RSU's are subject to a four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on December 14, 2019, 20% vest on December 14, 2020, 30% vest on December 14, 2021, and the remaining 35% vest on December 14, 2022.

**Remarks:**

Trisha L. Coady 12/17/2018  
 \*\* 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 5 (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.