FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

2. Issuer Name **and** Ticker or Trading Symbol

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer

(	Check this box if no longer subject to
	Section 16. Form 4 or Form 5
(	obligations may continue. See
- 1	nstruction 1(h)

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*  GORDON FRANK					2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]										k all applic Directo	cable) r		10% O	vner
(Last) (First) (Middle) 3102 WEST END AVE. SUITE 650						ate of 28/20		t Tran	saction (M	onth/[	Day/Year)			Officer below)	(give title		Other (: below)	specify	
(Street)	4. If	Amer	ndment,	Date	of Original	Filed	(Month/Da		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting										
(City)	(City) (State) (Zip)					Person													
		Tab	le I - Nor	า-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed c	of, or Be	nefici	ially	Owned				
1. Title of Security (Instr. 3)			2. Transa Date (Month/I		Execution Date,		3. Transaction Code (Instr. 8)					4 and Secu Bene Own		mount of urities eficially ned Following		Direct Indirect Istr. 4)	7. Nature of ndirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	e	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)
Common	Stock														88,	500		D	
Common	Stock														136	,000		I (	Held by Crofton Capital
Common	Stock														11,	386		I	Held by The Joel Company
Common Stock														2,500		I		Custodial account for minor child - Gavin B. Gordon	
Common Stock														2,500			I i	Custodial account for minor child - Cameron L. Gordon	
		7	able II -									or Bendele			wned			<u> </u>	
1. Title of Derivative Security (Instr. 3)	1. Title of 2. 2. 3. Transaction 2. 2. 2. 3. Transaction 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		Date,	4. Transactio Code (Inst		5. Number on		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount o Securities Underlying Derivative (Instr. 3 ar	f g Securit	D S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	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 Exercisab		xpiration ate	Title	Amour or Number of Shares	er					
Employee Stock Option (right to buy)	\$4.66	06/28/2010	06/28/2	010	A		5,000		06/28/201	1 00	6/28/2018	Common Stock	5,000	0	\$0.00	5,000	0	D	
Employee Stock Option (right to buy)	\$4.66	06/28/2010	06/28/2	010	A		5,000		06/28/201	2 00	6/28/2018	Common Stock	5,000	0	\$0.00	5,000	0	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr.: and 5)	tive ties ed sed	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$4.66	06/28/2010	06/28/2010	A		5,000		06/28/2013	06/28/2018	Common Stock	5,000	\$0.00	5,000	D	

**Explanation of Responses:** 

Remarks:

<u>Frank Gordon</u> <u>06/30/2010</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).