FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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	Check this box if no longer subject to
\neg	Section 16. Form 4 or Form 5
\cup	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* POLLEY DALE W			2. Issuer Name and Ticker or Trading Symbol <u>HEALTHSTREAM INC</u> [HSTM]								ck all appli	,							
(Last) (First) (Middle) 209 10TH AVENUE SOUTH			3. Date of Earliest Transaction (Month/Day/Year) 03/16/2017								, A	=	(give title		Other (s	·			
SUITE 450				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable							
(Street)	ILLE T	N :	37203										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Da		n Date,	Code						5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pi	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock														44,338 D		D			
		Т	able II - D									, or Ber ble sec			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	Code (In:				6. Date Exercisable : Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)		Date Exercisab		xpiration ate	Title	Amo or Num of Shar	ber					
Restricted Share Units	\$0.00 ⁽¹⁾	03/16/2017			A		2,766		(2)		(3)	Common Stock	2,7	66	\$0.00	2,766		D	

Explanation of Responses:

- $1. \ Each \ restricted \ share \ unit \ (RSU) \ represents \ the \ contingent \ right \ to \ receive \ one \ share \ of \ common \ stock \ upon \ vesting \ of \ the \ unit.$
- 2. 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 16, 2018 in three equal installments.
- 3. Not applicable.

Remarks:

<u>Dale Polley</u> <u>03/17/2017</u>

** 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.