FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OND AFF	TOVAL
l	OMB Number:	3235-0287
l	Estimated average by	ırdon

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response: 0								

1. Name and Address of Reporting Person*  SHMERLING MICHAEL D						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]									(Ch	eck all applic	ationship of Reportir all applicable) Director		10% Ov	ner
(Last) (First) (Middle) 618 CHURCH STREET SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 03/18/2014										Officer below)	(give title		Other (s below)	pecify
						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) NASHVILLE TN 37219																X Form f	iled by Mor	•	orting Person	
(City)	(Si	tate)	(Zip)																	
		Tab	le I - No	n-Deriv	/ative	e Se	curit	ies A	cqı	uired, I	Dis	posed o	f, or	Bene	eficial	y Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr								es ally Following	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership
									İ	Code	v	Amount	(A (I	A) or D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Stock			03/18	3/201	4				М		2,000	(1)	D	\$0.00	84	,295		D	
		٦	Table II -									osed of, onvertil				Owned		,		•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (1 8)				6. Date Exercisa Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dai Exc	te ercisable		Expiration Date	Title	0 10 0	Amount or Number of Shares					
Restricted Share Units	\$0.00 <sup>(2)</sup>	03/18/2014			M			1,000	03/	/18/2014 <sup>(:</sup>	3)	(4)	Comn		1,000	\$0.00	1,000		D	
Restricted Share	\$0.00 <sup>(2)</sup>	03/18/2014			M			1,000	03/	/18/2014 <sup>(:</sup>	5)	(4)	Comn		1,000	\$0.00	2,000		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 18, 2013 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 18, 2014 in three equal installments.

## Remarks:

**Michael Shmerling** 

03/19/2014

\*\* 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.