FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
---------------	-----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* REBROVICK LINDA					2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]									k all app Direc			10% O	vner	
(Last) (First) (Middle) 500 11TH AVENUE NORTH				3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022										Office belov	er (give title v)		Other (below)	specify	
SUITE 1000					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NASHV	ILLE T	N 3	7203											X		filed by On filed by Mo on		•	
(City)	(S	tate) (2	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)			es Acquired (A) o Of (D) (Instr. 3, 4		and Securit		ties cially Following	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or Pric	се	Transa	nsaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock Holding 03/10/20					2022			A		280(1)	A	. \$2	20.12	44	4,756		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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of	r osed (1. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)				9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Numbe of Shares						

Explanation of Responses:

1. Shares represent stock the reporting person elected to receive in lieu of cash payable for service on the Company's Board of Directors.

/s/ Linda Rebrovick

03/11/2022

** 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.