FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
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l	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

1. Name and Address of Reporting Person* HARRIS C MARTIN							2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]								ationship o k all applic Directo	cable)		erson(s) to Issuer 10% Owner	
(Last) (First) (Middle) 209 10TH AVE. SOUTH SUITE 450						3. Date of Earliest Transaction (Month/Day/Year) 03/17/2016									Officer below)	(give title		Other (s below)	pecify
(Street) NASHVILLE TN 37203				4. 1	f Ame	ndment	, Date o	f Original	Filed	(Month/Da <u>r</u>		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(5	State)	(Zip)																
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transa Date (Month/E					action	ction 2A. Deemed Execution Date			3. Transaction Code (Instr.		4. Securiti Disposed 5)	ies Acquir	ed (A) o	or 5. Amo 4 and Securit Benefic		s ally ollowing			7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D) Pr		e	Transaction(s) (Instr. 3 and 4)				
Common Stock 03/18					3/201	/2016			M		2,593(1	2,593 ⁽¹⁾ A \$		0.00	6,8	397		D	
			Table II -								sed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date, T	I. Fransa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		е	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
				C	Code	V	(A)	(D)	Date Exercisal		Expiration Date	Title	Amou or Numb of Share	oer		(Instr. 4)	on(s)	<u> </u>	
Restricted Share Units	\$0.00 ⁽²⁾	03/18/2016			M			1,000	(3)		(4)	Common Stock	1,00	00	\$0.00	0		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/18/2016			М			745	(5)		(4)	Common Stock	745	5	\$0.00	745		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/18/2016			M			848	(6)		(4)	Common Stock	848	3	\$0.00	1,697	,	D	
Restricted Share	\$0.00 ⁽²⁾	03/17/2016			A		3,224		(7)		(4)	Common Stock	3,22	24	\$0.00	3,224		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, 2014 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 11, 2015 in three equal installments.
- 6. 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 10, 2016 in three equal installments.
- 7. 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 17, 2017 in three equal installments.

Remarks:

C. Martin Harris

03/18/2016

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

** Signature of Reporting Person Date

* 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.