FORM 4

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

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

| STATEMENT | OF CHA | NGES IN | <b>I BENEFICIAL</b> | <b>OWNERSHIP</b> |
|-----------|--------|---------|---------------------|------------------|
|           |        |         |                     |                  |

| OMB APPROVAL        |           |  |  |  |  |  |  |  |  |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:         | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average I | 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*     O'Hara Kevin P |  |  | 2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ] |       |   |  |        |         |   | (Che                             | eck all appli   | cable)  | g Pers                              | son(s) to Iss<br>10% Ov<br>Other (s                               | vner   |                       |  |  |   |
|--|--|--|---|-------|---|--|--------|---------|---|----------------------------------|---|---|-------------------------------------|---|--|-----------------------|--|--|---|
| (Last) 500 11T   | H AVENU  | ,  | (Middle)  |       |   | 3. Date of Earliest Transaction (Month/Day/Year) 03/17/2021                  |        |         |   |                                  |   |   | 7                                   | below)  |  | ce Pre                | below)   | <b>Бреспу</b>  |   |
| (Street) NASHV   | ILLE T   |  | 37203   |       | 4. If                                   |  |        |         |   |                                  | Line  | ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |                                     |   |  | n                     |  |  |   |
| (City)   | (City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned                                       |  |   |       |   |  |        |         |   |                                  |   |   |                                     |   |  |                       |  |  |   |
| 1. Title of Security (Instr. 3) 2. Tra                   |  |  | 2. Trans<br>Date  |       |   | 3. 4. Securities Acqui<br>Transaction Disposed Of (D) (In<br>Code (Instr. 5) |        | uired ( | (A) or  | 5. Amou<br>Securitie<br>Benefici | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following |   | n: Direct<br>r Indirect<br>istr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |                       |  |  |   |
|  |  |  |   |       |   |  |        |         | Code  | v                                | Amount  | (A) or<br>(D)   |                                     | Price   | Transac  | action(s)<br>3 and 4) |  |  | , |
| Common Stock   |  |  |   |       |   |  |        |         |   |                                  |   |   |                                     |   | 0  |                       | D  |  |   |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |       |   |  |        |         |   |                                  |   |   |                                     |   |  |                       |  |  |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day                        | Date, | 4.<br>Transaction<br>Code (Instr.<br>8) |  | n of l |         | 6. Date Exercisabl<br>Expiration Date<br>(Month/Day/Year) |                                  | Amount of   |   |                                     | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)               | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | illy                  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |
|  |  |  |   |       | Code                                    | v  | (A)    |         | Date<br>Exercisabl  |                                  | xpiration<br>ate  | Title   | or<br>Nu<br>of                      | ımber   |  |                       |  |  |   |
| Restricted<br>Share                                      | \$0.00 <sup>(1)</sup>  | 03/17/2021                                 |   |       | A                                       |  | 5,215  |         | (2)   |                                  | (3)   | Commo<br>Stock  | n 5                                 | ,215  | \$0.00   | 5,215                 |  | 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 four year vesting schedule, contingent upon continued service at the time of vesting. 15% vest on March 17, 2022, 20% vest on March 17, 2023, 30% vest on March 17, 2024, and the remaining 35% vest on March 17, 2025.
- 3. Not applicable.

## Remarks:

Kevin P. O'Hara

03/18/2021

\*\* 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.