

HEALTHSTREAM INC

Reported by **STEAD WILLIAM**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/20/17 for the Period Ending 03/20/17

Address 209 10TH AVE SOUTH STE 450

NASHVILLE, TN 37203

Telephone 6153013100

CIK 0001095565

Symbol HSTM

SIC Code 7370 - Computer Programming, Data Processing, And

Industry Healthcare Facilities & Services

Sector Healthcare

Fiscal Year 12/31





Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 *						2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer				
STEAD WILLIAM						HEALTHSTREAM INC [HSTM]									(Check all applicable)				
				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								X _ Director						
						2.00.0017								Officer (give title below) Other (specify below)					
211 WILSONIA DRIVE						3/20/2017													
(Street)					4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
NASHVILLE, TN 37205 (City) (State) (Zip)														X Form filed by	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		ı	Table	I - No	n-Der	ivati	ive Sec	urities Ac	quir	ed, Di	isposed	l of	f, or Be	eneficially Own	ed				
1.Title of Security (Instr. 3) 2. Trans. Da					Execu	eemed ition if any	3. Trans. Co (Instr. 8)	ode	de 4. Securities Acq or Disposed of (I (Instr. 3, 4 and 5)		(D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form:	Beneficial			
							Code	V	Amou	mount (A) or		Price					Ownership (Instr. 4)		
Common Stock 3/20/2017					2017	М				2668 (1)	A	L	\$0.00	21006			D		
	Tab	le II - Deri	vative	Secui	rities I	Bene	ficially	Owned (e.g.	, puts	, calls,	wa	rrants	, options, conve	ertible sec	urities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. De Execut Date, it	ion (1. Trans. Code Instr. 8)	Derivative Securities (A) or D (D)			6. Date Exercisable and Expiration Date		S	Securities	nd Amount of Underlying e Security nd 4)		9. Number of derivative Securities Beneficially Owned Following	Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	V	(A)	(D)	Date Exerc	eisable	Expiration Date	on T	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		
Restricted Share Units	\$0.00 (2)	3/20/2017			M			745	9	(3)	<u>(4)</u>		Commo Stock	n 745	\$0.00	0	D		
Restricted Share Units	\$0.00 (2)	3/20/2017			M			848	1	<u>(5)</u>	<u>(4)</u>		Commo Stock	n 848	\$0.00	849	D		
Restricted Share Units	\$0.00 (2)	3/20/2017			M			1075	1	(6)	<u>(4)</u>		Commo Stock	n 1075	\$0.00	2149	D		
Explanation of	Responses	•																	

- Shares acquired on vesting of restricted share units.
- Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 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. 3)
- Not applicable. 4)
- 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
- 5) 10, 2016 in three equal installments.
- 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.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STEAD WILLIAM								
211 WILSONIA DRIVE	X							
NASHVILLE, TN 37205								

Signatures

William Stead 3/20/2017

** 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 control number.