

# HEALTHSTREAM INC

Reported by  
**HAYDEN GERARD M JR**

## FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/19/18 for the Period Ending 01/19/18

Address	209 10TH AVE SOUTH STE 450 NASHVILLE, TN, 37203
Telephone	6153013100
CIK	0001095565
Symbol	HSTM
SIC Code	7370 - Services-Computer Programming, Data Processing, Etc.
Industry	Healthcare Facilities & Services
Sector	Healthcare
Fiscal Year	12/31

# FORM 4

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

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continue. See Instruction 1(b).

## 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 (Check all applicable)	
<b>HAYDEN GERARD M JR</b>		<b>HEALTHSTREAM INC [ HSTM ]</b>		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <b>Chief Financial Officer</b>	
(Last) (First) (Middle)		3. Date of Earliest Transaction (MM/DD/YYYY)			
<b>209 10TH AVE. SOUTH, SUITE 450</b>		<b>1/19/2018</b>			
(Street)		4. If Amendment, Date Original Filed (MM/DD/YYYY)		6. Individual or Joint/Group Filing (Check Applicable Line)	
<b>NASHVILLE, TN 37203</b>				<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	
(City) (State) (Zip)					

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	1/19/2018		M		9750	A	\$3.15	36401	D	
Common Stock	1/19/2018		M		20000	A	\$3.58	56401	D	

**Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)**

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$3.15	1/19/2018		M		9750		5/19/2012	5/19/2018	Common Stock	9750	\$0.00	0	D	
Employee Stock Option (right to buy)	\$3.58	1/19/2018		M		2000		2/11/2011	2/11/2018	Common Stock	2000	\$0.00	0	D	
Employee Stock Option (right to buy)	\$3.58	1/19/2018		M		4000		2/11/2012	2/11/2018	Common Stock	4000	\$0.00	0	D	
Employee Stock Option (right to buy)	\$3.58	1/19/2018		M		6000		2/11/2013	2/11/2018	Common Stock	6000	\$0.00	0	D	
Employee Stock Option (right to buy)	\$3.58	1/19/2018		M		8000		2/11/2014	2/11/2018	Common Stock	8000	\$0.00	0	D	

**Explanation of Responses:**

**Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>HAYDEN GERARD M JR</b> <b>209 10TH AVE. SOUTH</b> <b>SUITE 450</b> <b>NASHVILLE, TN 37203</b>			<b>Chief Financial Officer</b>	

**Signatures**

**Gerard Hayden**

**1/19/2018**

\*\*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.

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