NEWMAN ARTHUR E

Form 4

August 19, 2009

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

5. Relationship of Reporting Person(s) to

Issuer

1.1

25,000 A

25,000 A

99,500

124,500

1,000

D

D

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January 31,

2005

0.5

Expires: Estimated average

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subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

See Instruction 1(b).

Stock

Stock

Stock

Stock

Common

Common

Common

08/18/2009

08/18/2009

08/18/2009

08/18/2009

M

M

(Print or Type Responses)

NEWMAN ARTHUR E

1. Name and Address of Reporting Person *

	NEWWIAN A	AKTHOKE	Symbol HEALT	Symbol HEALTHSTREAM INC [HSTM]				(Check all applicable)			
	(Last) 209 10TH A 450	(First) (M	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 08/18/2009				Director 10% Owner X Officer (give title Other (specify below)			
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	NASHVILL	E, TN 37203						Form filed by Person	More than One Re	eporting	
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										ly Owned	
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit on(A) or Di (D) (Instr. 3,	sposed	l of	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)	
	Common Stock	08/18/2009	08/18/2009	M	15,000	A	\$ 1.1	49,500	D		
	Common Stock	08/18/2009	08/18/2009	M	25,000	A	\$ 1 1	74,500	D		

Held by

Children

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

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SEC 1474 (9-02)

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 1.1	08/18/2009	08/18/2009	M		15,000	09/17/2002	09/17/2009	Common Stock	15,000
Employee Stock Option (right to buy)	\$ 1.1	08/18/2009	08/18/2009	M		25,000	09/17/2003	09/17/2009	Common Stock	25,000
Employee Stock Option (right to buy)	\$ 1.1	08/18/2009	08/18/2009	M		25,000	09/17/2004	09/17/2009	Common Stock	25,000
Employee Stock Option (right to buy)	\$ 1.1	08/18/2009	08/18/2009	M		25,000	09/17/2005	09/17/2009	Common Stock	25,000

Reporting Owners

Reporting Owner Name / Address			Keiauonsnips		
	Director	10% Owner	Officer	Other	
NEWMAN ARTHUR E 209 10TH AVE. SOUTH			Executive Vice President		

Reporting Owners 2

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SUITE 450 NASHVILLE, TN 37203

Signatures

Arthur Newman 08/19/2009

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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