Edgar Filing: Doster Jeffrey - Form 4

Doster Jeffre	y										
Form 4											
January 10, 2	2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITE	D STATES		AITIES A Shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi				0					Expires:	January 31	
if no long subject to Section 1 Form 4 o	6. SIAII	GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Estimated average burden hours per					
Form 5 obligation may cont <i>See</i> Instru 1(b).	Filed p ns Section 1 inue.	7(a) of the	Public Ut		ling Com	pany	Act of	e Act of 1934, E 1935 or Section 0	response n	0.5	
(Print or Type F	Responses)										
Doster Jeffrey Sym				2. Issuer Name and Ticker or Trading ymbol				5. Relationship of Reporting Person(s) to Issuer			
			HEALT	LTHSTREAM INC [HSTM]				(Check all applicable)			
(Last)					f Earliest Transaction						
				$0/2018$ X_{below} Office				/	jive title Other (specify below) f Information Officer		
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
NASHVILL	LE, TN 37203							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecuri	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	med on Date, if Day/Year)	h Date, if Transaction(A) or Dispose Code (Instr. 3, 4 and			ed of (D) Securities d 5) Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	01/10/2018			М	20,000	А	\$ 3.58	30,235	D		
Common Stock	01/10/2018			М	25,000	А	\$ 7.66	55,235	D		

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

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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. 5. Number Transaction Derivative Code Securities (Instr. 8) 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)	\$ 3.58	01/10/2018		М	2,000	02/11/2011	02/11/2018	Common Stock	2,000
Employee Stock Option (right to buy)	\$ 3.58	01/10/2018		М	4,000	02/11/2012	02/11/2018	Common Stock	4,000
Employee Stock Option (right to buy)	\$ 3.58	01/10/2018		М	6,000	02/11/2013	02/11/2018	Common Stock	6,000
Employee Stock Option (right to buy)	\$ 3.58	01/10/2018		М	8,000	02/11/2014	02/11/2018	Common Stock	8,000
Employee Stock Option (right to buy)	\$ 7.66	01/10/2018		М	3,750	02/11/2012	02/11/2019	Common Stock	3,750
Employee Stock Option (right to buy)	\$ 7.66	01/10/2018		М	5,000	02/11/2013	02/11/2019	Common Stock	5,000
Employee Stock	\$ 7.66	01/10/2018		М	7,500	02/11/2014	02/11/2019	Common Stock	7,500

Option (right to buy)								
Employee Stock Option (right to buy)	\$ 7.66	01/10/2018	М	8,750	02/11/2015	02/11/2019	Common Stock	8,750

Reporting Owners

Reporting Owner Name / Addr	ess		Relationships		
	Director	10% Owner	Officer	Other	
Doster Jeffrey 209 10TH AVE. SOUTH SUITE 450 NASHVILLE, TN 37203			Chief Information Officer		
Signatures					
Jeffrey Doster	01/10/2018				
<u>**</u> Signature of Reporting Person	Date				

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.