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HEALTHSTREAM INC

Form 3

February 20, 2007

FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

response...

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washington, D.C. 2024)

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(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement HEALTHSTREAM INC [HSTM] O'Hara Kevin P (Month/Day/Year) 02/15/2007 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) **209 10TH AVENUE** (Check all applicable) SOUTH, SUITE 450 (Street) 6. Individual or Joint/Group 10% Owner Director _X__ Officer Other Filing(Check Applicable Line) (give title below) (specify below) _X_ Form filed by One Reporting Senior Vice President Person NASHVILLE, ÂTNÂ 37203 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 5) (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Â 0 No securities are beneficially owned D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. 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.

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

1. Title of Derivative Security (Instr. 4) 2. Date Exercisal Expiration Date (Month/Day/Year)	Expiration Date	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		(1115ti. 4)	Trice of	Derivative	(IIISU. <i>3)</i>
		Title	Derivative	Security:	
			Security	Direct (D)	

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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	03/15/2006	03/15/2010	Common Stock	5,000	\$ 1.35	D	Â
Employee Stock Option (right to buy)	04/16/2006	04/16/2011	Common Stock	5,000	\$ 1.315	D	Â
Employee Stock Option (right to buy)	04/16/2007	04/16/2011	Common Stock	5,000	\$ 1.315	D	Â
Employee Stock Option (right to buy)	02/19/2005	02/19/2012	Common Stock	4,000	\$ 2.69	D	Â
Employee Stock Option (right to buy)	02/19/2006	02/19/2012	Common Stock	4,000	\$ 2.69	D	Â
Employee Stock Option (right to buy)	02/19/2007	02/19/2012	Common Stock	4,000	\$ 2.69	D	Â
Employee Stock Option (right to buy)	02/19/2008	02/19/2012	Common Stock	4,000	\$ 2.69	D	Â
Employee Stock Option (right to buy)	02/25/2006	02/25/2013	Common Stock	5,000	\$ 3.18	D	Â
Employee Stock Option (right to buy)	02/25/2007	02/25/2013	Common Stock	5,000	\$ 3.18	D	Â
Employee Stock Option (right to buy)	02/25/2008	02/25/2013	Common Stock	5,000	\$ 3.18	D	Â
Employee Stock Option (right to buy)	02/25/2009	02/25/2013	Common Stock	5,000	\$ 3.18	D	Â
Employee Stock Option (right to buy)	02/09/2007	02/09/2014	Common Stock	7,000	\$ 2.75	D	Â
Employee Stock Option (right to buy)	02/09/2008	02/09/2014	Common Stock	7,000	\$ 2.75	D	Â
Employee Stock Option (right to buy)	02/09/2009	02/09/2014	Common Stock	7,000	\$ 2.75	D	Â
Employee Stock Option (right to buy)	02/09/2010	02/09/2014	Common Stock	7,000	\$ 2.75	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				
F	Director	10% Owner	Officer	Other	
O'Hara Kevin P 209 10TH AVENUE SOUTH SUITE 450 NASHVILLE, TN 37203	Â	Â	Senior Vice President	Â	

Reporting Owners 2

Signatures

Kevin P. O'Hara 02/20/2007

**Signature of Date
Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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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