FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					01 3	Secur	JII 30(II)	or the r	nvesine	iii Cui	прапу Аст	01 194	0								
1. Name and Address of Reporting Person * $\overline{TURNER\ ANDREW\ L}$						2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
TURNER ANDREW L					IN	INC. [STRM]									X	Direc	ctor	1	0% O	wner	
						<u></u>										Officer (give title			Other (specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									below)				elow)		
4121 W.	DRAVUS S	TREET			05/	26/2	010														
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
SEATTL	E W	A 9	98199											X	Form filed by One Reporting Person				on		
(0:1.)	(0)		- · \												Forn Pers	m filed by More than One Reporting son					
(City)	(St	ate) (Zip)																		
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Transaction Dispo			rities Acquired (A) ed Of (D) (Instr. 3, 4			ıd	Securities F Beneficially (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount (A) (D)		(A) or (D)	Price	Trans		action(s) 3 and 4)			(111311. 4)	
Common Stock \$.01 Par Value 05/26/2				/2010			A		17,567(1)		A	\$1.85		48,167		D					
		Та							,		sed of, onvertib				y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date, 1		Transaction Code (Instr.				6. Date Exercisable Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa	sable	Expiration Date	Title	of	nber res	ı						

Explanation of Responses:

1. These shares of resticted stock were granted pursuant to the 2005 Incentive Compensation Plan, and will vest on the earlier of May 26, 2011 or the 2011 Annual Stockholder Meeting conditioned upon the director serving the associated full term.

Remarks:

/s/ Matthew D. Rolfes by power of atty. 05/27/2010

** 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 Number.