SEC Form 4

FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287
Estimated average bi	urden
hours per response:	0.5

1. Title of Secur	rity (Instr. 3)		2. Transaction	2A. Deemed	3.	4. Securities Acquired (A		5. Amount of	•	6. Ownership	7. Nature
		Table I - Nor	n-Derivative S	Securities Acq	uired, Dis	posed of, or Benef	icially	Owned			
(City)	(State)	(Zip)						Form filed I Person	by Moi	re than One Re	porting
(Street) ALPHARET	TA GA	30009	4. If A	amendment, Date o	f Original Filed	d (Month/Day/Year)	6. Indiv Line) X			p Filing (Check) e Reporting Per	
(Last) 11800 AMBE	(First) ERPARK DRIVI	(Middle) E SUITE 125		3. Date of Earliest Transaction (Month/Day/Year) 05/01/2020				Chief Financial Officer			
1. Name and Address of Reporting Person [*] Gibson Thomas J.			STE	2. Issuer Name and Ticker or Trading Symbol <u>STREAMLINE HEALTH SOLUTIONS</u> <u>INC.</u> [STRM]				ationship of Report k all applicable) Director Officer (give title		10% C Other	Owner (specify
	b. Form 4 or Form 5 hay continue. <i>See</i> (b).			nt to Section 16(a) ction 30(h) of the Ir		es Exchange Act of 1934 npany Act of 1940				per response:	0.5

	Date (Month/Day/Year)	if any '	Transaction Code (Instr. 8)					Securities Beneficially Owned Following Reported	(D) or Indirect	of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock, \$0.01 par value	05/01/2020		F		5,474 ⁽¹⁾	D	\$0.9 7	213,552	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 2. Conversion 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature Transaction Code (Instr. 8) Execution Date. Ownership Derivative Date of Expiration Date Amount of Derivative derivative of Indirect or Exercise Price of Derivative Form: Direct (D) or Indirect Security (Instr. 3) (Month/Day/Year) if any (Month/Day/Year) Derivative (Month/Day/Year) Securities Security (Instr. 5) Securities Beneficial Securities Acquired Beneficially Ownership (Instr. 4) Underlying Derivative Owned Security (A) or Disposed Security (Instr. 3 and 4) Following Reported (I) (Instr. 4) of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount or Number

Date

Exercisable

(D)

(A)

Expiration

Date

Explanation of Responses:

1. Surrender of stock upon vesting of restricted stock to satisfy tax withholding obligations.

Remarks:

/s/ Thomas J	. Gibson

of

Shares

Title

** Signature of Reporting Person Date

05/05/2020

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).

v

Code

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.