Instruction 1(b).

FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Green Wyche T III</u>				ST	2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [ STRM ]							(Che	elationship ck all app Direc	licabl	,		(s) to Iss 10% Ow		
(Last) 11800 A STE 125	11800 AMBERPARK DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 12/04/2021								X Officer (give title below)  President 8				Other (specify below)		
(Street) ALPHARETTA GA 30009 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transaction Date (Month/Day/Yea	er) Ex	2A. Deeme Execution if any (Month/Day		Cod	Transaction Code (Instr.				quired (A) or (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Natur Indirect Benefic Owners 4)	
							Cod	de	v A	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)					
Common	Stock, \$0.0	Stock, \$0.01 par value 12/04/2021 F 11,288 <sup>(1)</sup>				11,288(1)	D	\$1.49		617,786 D									
Common	Common Stock, \$0.01 par value												593,137		7	I		Refer to footnote. (2)(3)(4)	
	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. Transa Code 8)	· 	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired sed . 3, 4	Expiration Date (Month/Day/Year) ed ed , 4  Date Expiration			An Se Un De Se 3 a	Fitle and nount of curities derlying rivative curity (Inst nd 4)  Amour or Numbe of Shares	Derivative Security (Instr. 5) or.  r.  Derivative Se Security (Instr. 5) Or.  Fo Re Tr.  (In		deri Sec Ben Owr Follo Rep Tran	ecurities eneficially wned		nership m: ect (D) ndirect instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. Surrender of stock upon vesting of restricted stock to satisfy tax withholding obligations.
- 2. Includes 250,000 shares issued pursuant to an underwritten public offering of Streamline Health Solutions, Inc. common stock, par value \$0.01 per share. The price to the public in the offering was \$1.60 per share of common stock.
- 3. Includes 343,137 shares purchased from the Issuer in connection with a private placement transaction consummated on October 16, 2019.
- 4. The securities are held in the account of 121G, LLC (the "Holder") and may be deemed to be beneficially owned by Wyche "Tee" Green, III, the managing member of the Holder.

## Remarks:

/s/ Thomas J. Gibson, attorney-in-fact

12/08/2021

\*\* 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.