FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

					0, 00	CHOILO	o(n) or the	iiiv Cotiiici	001		01 10-	+0						
1. Name and Address of Reporting Person* LOMBARDO ERIC (Last) (First) (Middle) 7173 ROYALGREEN DR.					STF	2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				
					, INC	<u>INC.</u> [STRM]									er (give title		r (specify	
					3. Date of Earliest Transaction (Month/Day/Year) 06/12/2012									belo		belov		
(Street) CINCINNATI OH 45244				4. If A	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					
(City) (State) (Zip)														Form filed by More than One Reporting Person				
		Tab	le I - Noi	n-Deriv	ative S	Secui	rities Ac	quired,	Dis	posed o	f, or	Ben	efici	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution (ay/Year) if any		cution Date,	n Date, Transa Code (I		on Disposed Of (I		es Acquired (A) Of (D) (Instr. 3, 4		nd Secur Benef	rities ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	Trans	action(s) 3 and 4)		(instr. 4)	
Common Stock 06/12/				2/2012			s 154,349 D		\$3	.54 1,:	1,181,703							
		Ta					ies Acqu arrants,							y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	n Date, Transaction Code (Ins		tion construction	5. Number of Derivative Securities 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 Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Date Exercisable

Expiration

Explanation of Responses:

Eric S. Lombardo

Title

06/14/2012

** Signature of Reporting Person

of Shares

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.

(D)