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

| Washington, | D.C. | 20549 | |
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| | | | |

| STATEMENT (| OF CHANGES IN | I BENEFICIAL | OWNERSHIP |
|-------------|---------------|--------------|-----------|
| | | | |

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Starkey Judith | | | | | 2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM] | | | | | | | | | ck all app Direc | tor | ng Pe | 10% O | Owner | |
|--|--|--|---|-----------------|---|--|-----|---|--|--------------------|---|----------------------|--------------------------------------|--|--------------------------------|--|---------------------------------------|------------|--|
| (Last) (First) (Middle) 1175 PEACHTREE STREET NE, 10TH FLOOR | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2020 | | | | | | | | | | Officer (give title below) | | Other (below) | specify | | | |
| (Street) ATLAN (City) | | | 0361 | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Inc Line) X | Form | r Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting on | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date | | | 2. Transac Date (Month/Da | Execution Date, | | 3. Transaction Disposed Of (D) (Instr. 3 5) | | | | Securit Benefic | urities eficially ied Following | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | | |
| | | | | | | | | Code | v | Amount | (A) (D) | or F | rice | Transa | ansaction(s) estr. 3 and 4) | | | (Instr. 4) | |
| Common Stock, \$0.01 par value 05/2 | | | 05/22/ | 2020 | | A ⁽¹⁾ | | 63,158 A \$ | | \$0.00 | 00 438,718 | | | D | | | | | |
| 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) | Execution Date, | | | Transaction of Code (Instr. Derivative | | vative irities ired r osed) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | str. | Price of erivative ecurity istr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | of Shar | es | | | | | |

Explanation of Responses:

1. Grant of restricted stock that vests in full on the earlier of (i) May 22, 2021 and (ii) the date of, and immediately prior to, the Company's 2021 annual meeting of stockholders.

Remarks:

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

05/26/2020

** 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.