FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>LEVY RICHARD C</u>							2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [ STRM ]									tionship of Reportir all applicable) Director		g Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 7325 INDIAN HILL ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/28/2011											Officer (give title below)		Other (specify below)		
(Street) CINCINI (City)		4. If Amendment, Date of Original Filed (Month/Day/Year)										ne) <mark>X</mark> Fo Fo	dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
		Tabl	e I - No	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, or I	3ene	eficia	lly Ow	ned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			Transaction Disposed (Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			d Secu Ben Own	nount of irities eficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A (D	) or )	Price	Tran	orted saction(s) r. 3 and 4)			(Instr. 4)	
Common	Stock \$.01	Par Value		12/28	8/2011	-	12/28	/2011	P		45,45	4	A	\$1.6	65	143,520	]	D		
		Та									sed of, onvertib				Owne	d				
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,	4. Transactioi Code (Instr 8)				6. Date E Expiratio (Month/D	n Dat	е	Amount of		str. 3	8. Price o Derivative Security (Instr. 5)		y Ov Fo Dii or (I)	0. wwnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of Sha	nber						

Explanation of Responses:

Remarks:

Stephen H. Murdock, by Power of Attorney

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.