FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasimigton, b.c. 20043

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
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).

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*     Meeks Nicholas						2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [ STRM ]									Check	all app	olicable)		Ssuer Owner (specify
(Last) (First) (Middle) 1230 PEACHTREE STREET SUITE 600						3. Date of Earliest Transaction (Month/Day/Year) 01/20/2015									X Officer (give title Officer Specify below)  Chief Financial Officer				
(Street) ATLANTA GA 30309  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									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																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instruction of the control					ıd 5)	Securities Beneficially		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	Tran		action(s) 3 and 4)		(111501.4)		
Common Stock, \$.01 par value 01/20/2							2015		P <sup>(1)</sup>		1,000		Α	\$3.5367		5,796		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)	vative Conversion Date Execution or Exercise (Month/Day/Year) if any			n Date,	4. Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	nt		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	of	ares						

## **Explanation of Responses:**

1. These shares were acquired by the reporting person in a private transaction.

## Remarks:

Jack W. Kennedy Jr., Attorney

\*\* Signature of Reporting Person

in Fact

ot/22/2015

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.