Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Sides David William						2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]							Officer (give title			ner pecify
	500 PEACHTREE ST NE				3. Date of Earliest Transaction (Month/Day/Year) 01/08/2015							President & CEO				
SUITE 600 (Street) ATLANTA GA 30309					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				
(City) (State) (Zip)												Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date				2. Transac Date Month/Da		Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)		ed (A) or tr. 3, 4 and	Beneficia	s ally following	Form (D) o	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 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 Dat if any (Month/Day/Y	Cod	e, Transactio Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	le V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option	\$4.28	01/08/2015		A		50,000		(1)	01/07/2025	Common Stock, \$.01 par value	50,000	\$0.00	50,000	0	D	

Explanation of Responses:

1. The stock options shall vest and become exercisable, subject to the reporting person's continued employment, as follows: (1) one half of will vest on January 8, 2016 and (2) the other half will vest at the rate of one-twelfth on each of the one-month anniversaries of January 8, 2015.

Remarks:

Jack W. Kennedy Jr., Attorney

in Fact

** Signature of Reporting Person Date

01/12/2015

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.