(Last)

(Street)

SUITE 360

(First)

5050 AVENIDA ENCINAS

(Middle)

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden

0.5

			5	ECURITIES				hours pe	er response:	0.5	
				.6(a) of the Securities Exchange at the Investment Company Act of 1							
1 Name and Address of Reporting Person* 2. Date of Event		2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]							
			Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)				
				Officer (give title below)	Other (spe	low) Appl		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person			
(City) (State) (Zip)											
	Т	able I - Non		ve Securities Beneficial	1						
1. Title of Security (Instr. 4)				Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Dire or Indirect (Instr. 5)	ct (D) (4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock, \$0.01 par value				4,305,882(1)(2)	D(1)(2	2)					
Common Stock, \$0.01 par value				33,252 ⁽³⁾	D ⁽³⁾						
	(e.g			e Securities Beneficially nts, options, convertible		es)					
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable ar Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Secur		4. Convers or Exerc	rcise Form:	wnership		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivati Security	ve or	r Indirect) (Instr. 5)			
Name and Address of Reporting Person* Ferayorni Justin John		,			,		,		•		
(Last) (First) 5050 AVENIDA ENCINAS SUITE 360	(Middle)										
(Street) CARLSBAD CA	92008										
(City) (State)	(Zip)										
Name and Address of Reporting Person* Tamarack Capital GP, LLC											
(Last) (First) 5050 AVENIDA ENCINAS SUITE 360	(Middle)										
(Street) CARLSBAD CA	92008										
(City) (State)	(Zip)										
Name and Address of Reporting Person* Tamarack Advisers, LP											

CARLSDAD	CA	32000	
(City)	(State)	(Zip)	
1. Name and Address Tamarack Cap			
(Last) 5050 AVENIDA SUITE 360	(First) ENCINAS	(Middle)	
(Street) CARLSBAD	CA	92008	_
(City)	(State)	(Zip)	
1. Name and Address Tamarack Glo			
(Last) 5050 AVENIDA SUITE 360	(First) ENCINAS	(Middle)	
(Street) CARLSBAD	CA	92008	_
(City)	(State)	(Zip)	
1. Name and Address Tamarack Glo		on* e Fund QP, L.P.	_
(Last) 5050 AVENIDA SUITE 360	(First) ENCINAS	(Middle)	
(Street) CARLSBAD	CA	92008	_
(City)	(State)	(Zip)	

92008

Explanation of Responses:

CARLSBAD

CA

- 1. The reported securities represent 3,598,334 shares held directly by Tamarack Global Healthcare Fund, L.P. ("Fund 1") and 707,548 shares held directly by Tamarack Global Healthcare Fund QP, L.P. ("Fund 2"). Tamarack Capital Management, LLC is the general partner of Fund 1 and Fund 2, Tamarack Advisers, LP is the investment adviser to Fund 1 and Fund 2, and Justin J. Ferayorni is the sole managing member of both Tamarack Capital Management, LLC and Tamarack Capital GP, LLC. Tamarack Capital Management, LLC, Tamarack Advisers, LP, and Mr. Ferayorni may be deemed indirect beneficial owners of the shares held by Fund 1 and Fund 2 for purposes of Section 13(d) of the Securities Exchange Act of 1934 (the "Act").
- 2. Tamarack Capital Management, LLC, Tamarack Advisers, LP, and Mr. Ferayorni disclaim beneficial ownership of any of the shares held by Fund 1 and Fund 2 for the purpose of determining whether they are subject to Section 16 of the Act, however, in reliance on Rule 16a-1(a)(1)(v) and (vii) under the Act. To the extent that they might be deemed subject to Section 16, they disclaim beneficial ownership of securities held by the Fund 1 and Fund 2 for purposes of Rule 16a-1(a)(2), except to the extent of their pecuniary interest therein, if any.
- 3. The reported securities represent shares owned directly by Mr. Ferayorni.

Remarks:

Mr. Ferayorni is the sole owner of the reported entities, other than Tamarack Global Healthcare Fund, L.P. and Tamarack Global Healthcare Fund QP, L.P., and signed this form on behalf of himself, each of the other reporting entities, and as the managing member of the general partner of Tamarack Global Healthcare Fund, L.P. and Tamarack Global Healthcare Fund QP, L.P.

<u>Justin J. Ferayorni</u> <u>10/25/2019</u>

** 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 5 (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.