FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
	Estimated average burde	en				
	hours per response:	0.5				

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

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Sides David William					IN	INC. [ STRM ]									\ Direc		10% Owner		
(Last) (First) (Middle)				3 [	O Data of Stations Transaction (ct. 11 (S. Ct. )									belov	er (give title w)	2	below)	(specify	
1175 PEACHTREE STREET NE, 10TH FLOOR			OOR	3. Date of Earliest Transaction (Month/Day/Year) 01/08/2019 President & CEO															
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year) 01/10/2019									6. Individual or Joint/Group Filing (Check Applicable Line)						
AILANI	ATLANTA GA 30361													X Form filed by One Reporting Person  Form filed by More than One Reporting					
(City)	(St	ate)	Zip)												Pers		ore triair o	іс іхер	orung
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
		2. Transaction Date (Month/Day/Year)		Execution Date,		Transaction Di		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)		and Securities Beneficially Owned Followin		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ct li ect E	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) o (D)	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, \$0.01 par value			01/08/2019		019		P		10,000	A	\$0	).94	196,000		I	I	Owned in ndividual Retirement Account		
Common Stock, \$0.01 par value		01/09/2019		)		P		10,000	A	\$0	).98	206,000		I	I F	Owned in ndividual Retirement Account			
Common Stock, \$0.01 par value														443,318 <sup>(1)</sup>		I	t c t c c	Owned by rust controlled by and for the benefit of the eporting person	
		Ta									osed of, o				Owned				
1. Title of Derivative Conversion Date SA. Deemed Execution Date, Tra		4. Transa Code (	ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		isable and te	7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		8. Price of Derivative Security (Instr. 5) Own Folic Report Tran		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own Form Direct or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er					

## **Explanation of Responses:**

1. This amendment is being filed solely to correct (a) an error in the ownership form of 380,000 shares previously reported as directly owned, and (b) to include in total amount owned in trust 13,318 shares purchased through the Issuer's employee stock purchase program.

## Remarks:

/s/ Luciana Mullen, Attorney in 01/11/2019 **Fact** 

\*\* 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.