FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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* Brown Joseph O II | | | | | | 2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM] | | | | | | | | | | 5. Relationship of Repo (Check all applicable) Director X Officer (give tire | | | 10% Owner Other (specify | | |
|---|--|--|--|-------|---------------------|---|---|-------|------------|--------------------------------------|------|---|---|------------------|--------------|---|---|---------------|--|---|--|
| (Last) 7507 KO | (Fi OUSA CT. | rst) (| (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/02/2008 | | | | | | | | | | Vice President | | | | | |
| (Street) MASON (City) | Ol (Si | - 4. li | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | i. Individual or Joint/Group Filing (Check Applicable ine) 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. Transa Date (Month/D | | | | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | Transaction Disposed Code (Instr. 5) | | | eurities Acquired (A) sed Of (D) (Instr. 3, 4 | | | | es ally Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Reported Transact (Instr. 3 | ction(s) | | | Instr. 4) | | | | |
| Common Stock \$.01 Par Value 06/02 | | | | | | | 2008 | | | М | | 5,000 | 0 A | | \$1.5 | 18 | ,680 | | D | | |
| Common Stock \$.01 Par Value | | | | | | | | | | | | | | | | 8 | 330 | | I] | By Child | |
| | | Т | able II - | | | | | | | | | | , or Bei ble sec | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | ate, Transa Code | | of | | Exp | Date Exer piration I pnth/Day | Date | Amount Securiti Underly Derivati | | ount of curities | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | s Ily | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | Code V | | (D) | Dat Exe | e ercisable | | piration te | Title | or Nui of | mber ares | | | | | | |
| Stock Option | \$1.5 | 06/02/2008 | | | М | | | 5,000 | 04/ | /19/2001 | 04 | /18/2010 | Common Stock \$.01 Par Value | | 000 | \$1.5 | 5,000 |) | D | | |

Explanation of Responses:

Remarks:

Donald Vick, by power of atty. 06/03/2008

** Signature of Reporting Person Date

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

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.

^{*} 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).