FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

	OMB Number:	3235-0287							
Estimated average burden									
	hours por rosponso:	0.6							

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

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Name and Address of Reporting Person* Zelnio Carolyn				<u>S7</u>	2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]								(Ched	ck all applic Directo Officer	cable) or (give title	g Pers	son(s) to Issu 10% Ow Other (s	ner		
(Last) (First) (Middle) 1230 PEACHTREE STREET #1000						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013								^	X Officer (give title Officer Specify below) Chief Accounting Officer					
(Street) ATLAN			30309 (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefi	cially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					Execution Date,		Code (Transaction Code (Instr. 3, 4 5)		and Securitie Beneficia Owned F Reported Transacti		es Forn ally (D) o Following (I) (Ir		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (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 D if any (Month/Day/	ate, T	4. Transactio Code (Inst		action of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4		Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Nun of Sha							
Stock Option	\$6.28	05/15/2013			A		75,000		06/15/201	.3 (05/15/2023	Common Stock \$.01 Par Value	75,	000	\$6.28	75,000	0	D		

Explanation of Responses:

Carolyn Zelnio

05/24/2013

** 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 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.