FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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* PHILLIPS JONATHAN R						2. Issuer Name and Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]											all app	onship of Reporting all applicable) Director Officer (give title below)		10% C)wner
(Last) (First) (Middle) 792 CHATHAM AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/18/2014														Other (below)	(specify
(Street) ELMHUI		state)	60126 (Zip)	6	- 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)										i. Indiv .ine) X	Form	or Joint/Group Filing (Check Applicable on filed by One Reporting Person on filed by More than One Reporting son			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)						Execution Da			,	3. Transa Code (I 8)		n Disposed O		ties Acquired (A) I Of (D) (Instr. 3,				ties cially I Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
					Ī	Code	v	Amount (A		(A) or (D)	Pric			saction(s) r. 3 and 4)			(Instr. 4)				
Common Stock \$.01 par value 09/18/						2014				P		5,000	5,000 A		\$	3.9	412,498			D	
Common Stock \$.01 par value																	10,000			I	Owned by Spouse
	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)	Exec Year) if any	Deemed cution Date, y nth/Day/Year)	4. Transa Code 8)		of Deriv Secu Acqu (A) o Disp of (D	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Ex piration lonth/Da	Date		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)			Deri Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)			Expiration Date	Title	or Nur of	ount nber ires							

Explanation of Responses:

Remarks:

Jack W. Kennedy Jr., Attorney 09/22/2014

in Fact

** 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.