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STREAMLINE HEALTH SOLUTIONS INC.

Form 4

par value

February 03, 2015

FORM	I 4					APPROVAL		
	UNITEDSIA		ITIES AND EXCHAUTION	ANGE COMMISSION	ON OMB Number:	3235-0287		
Check thi if no long	er				Expires:	January 31,		
subject to Section 10 Form 4 or Form 5	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 193				Estimated average burden hours per response 0.5		
obligatior may conti <i>See</i> Instru 1(b).	Section 17(a) of inue.	f the Public Ut	ility Holding Compar vestment Company A	y Act of 1935 or Sec				
(Print or Type R	Responses)							
1. Name and A Sides David	ddress of Reporting Perso William	Symbol	Name and Ticker or Trad	ing 5. Relationshi Issuer	5. Relationship of Reporting Person(s) to Issuer			
			IONS INC. [STRM]	(0	Check all applicat	ole)		
(Last)	(First) (Middle	e) 3. Date of (Month/D	Earliest Transaction	X Director X Officer (0% Owner ther (specify		
600 PEACH 600	TREE ST NE, SUIT			below)	below) President & CEO)		
	(Street)		ndment, Date Original th/Day/Year)	6. Individual o	or Joint/Group Fi	ling(Check		
ATLANTA,	GA 30309	T Hed(World	ui/Day/ (Cai)	_X_ Form filed	by One Reporting			
(City)	(State) (Zip)	Table	e I - Non-Derivative Secu		d of, or Benefici	ally Owned		
1.Title of Security (Instr. 3)	(Month/Day/Year) Ex	Pransaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)		5. Amount of or Securities D) Beneficially d 5) Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
C			Code V Amount (D	(Instr 3 and 4)				
Common Stock, \$.01 par value				5,000	D			
Common						Owned by trust controlled		
Stock, \$.01				50,000	I	by and for		

the benefit of reporting person

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

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 control number.

SEC 1474 (9-02)

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 Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day/	ate	7. Title and Underlying (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 4.02	02/01/2015		A	50,000	(1)	01/31/2025	Common Stock, \$.01 par	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Sides David William 600 PEACHTREE ST NE					
SUITE 600	X		President & CEO		
ATLANTA, GA 30309					

Signatures

Jack W. Kennedy Jr., Attorney in Fact 02/03/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

The stock options shall vest and become exercisable as follows: One-half of the options shall vest on the one-year anniversary of the grant (1) date, and one-twelfth shall vest on each of the thirteen- through twenty-four-month anniversaries of the grant date, subject to the reporting person's continued employment over the vesting period.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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