## Edgar Filing: Zelnio Carolyn - Form 4

Zelnio Caro Form 4 May 24, 20									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL	
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					3235-0287		
Check t if no los subject Section Form 4 Form 5 obligati may co <i>See</i> Insi	nger to 16. or Filed pur ons ntinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							January 31, 2005 average Jrs per . 0.5
1(b).									
(Print or Type	Responses)								
1. Name and Address of Reporting Person <u>*</u> Zelnio Carolyn			2. Issuer Name <b>and</b> Ticker or Trading Symbol STREAMLINE HEALTH SOLUTIONS INC. [STRM]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (Middle)			3. Date of Earliest Transaction				Director 10% Owner		
1230 PEACHTREE STREET #1000			(Month/Day/Year) 05/15/2013				Officer (give title Other (specify below) below) Chief Accounting Officer		
(Street) ATLANTA, GA 30309			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)							
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Coue v	Amount	(D) Price			
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	-	-	-		
					inforn requir	nation cont ed to resp	spond to the colle ained in this form ond unless the fo ntly valid OMB co	i are not rm	SEC 1474 (9-02)

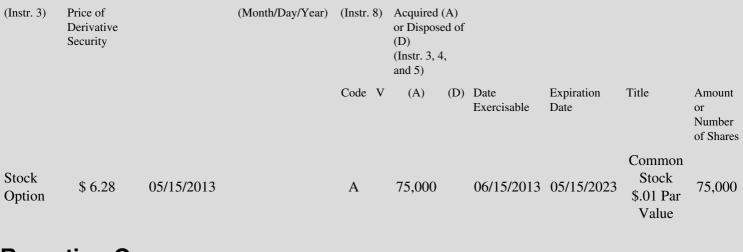
 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

number.

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

## Edgar Filing: Zelnio Carolyn - Form 4



## **Reporting Owners**

Reporting Person

Reporting Owner Name / Address				Relationships		
		Director	10% Owner	Officer	Other	
Zelnio Carolyn 1230 PEACHTREE STREET #1000 ATLANTA, GA 30309				Chief Accounting Officer		
Signatures						
Carolyn Zelnio	05/24/20	13				
<u>**</u> Signature of	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).

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.