FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0 | | | | | | | | |
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Black Paul | | | | | ALL | 2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [MDRX] | | | | | | | | | (Check all ap | | olicable) tor | | Owner | |
|--|---|-----|---------------------------------|--------------|---|--|---|-------------------------|---|---|---|---------------|--|---------------|---|--|--|--|---|--|
| (Last) (First) (Middle) 222 MERCHANDISE MART PLAZA | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2016 | | | | | | | | | X | Officer (give title below) | | Other below EO | (specify) | | |
| (Street) CHICAGO IL 60654 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 02/26/2016 | | | | | | | | | | ndividual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (Sta | | Zip) | Iam Daniu | -4: | • | !4! - | | ! | Dia | | | . Da | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Tran | | | | 2. Transacti | ection 2. E ay/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired Disposed Of (D) (Instr. 5) | | | d (A) d | or | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Repo Trans | | | (Instr. 4) | (msu: 4) | | |
| Common S | tock | | | 02/24/20 | 016 | | | | F ⁽¹⁾ | | 4,617 | | D | \$12 | .39 | 9: | 51,708 | D | | |
| Common Stock | | | | 02/24/20 | 016 | ; | | | A ⁽²⁾ | | 81,498 | 81,498 A | | \$0. | 00 | 1,033,206 | | D | | |
| Common Stock | | | | 02/24/20 | 016 | 5 | | | F ⁽¹⁾ | | 31,904 D | | \$12 | 2.39 1,0 | | 01,302 | D | | | |
| Common Stock | | | | 02/24/2016 | | 5 | | | A ⁽³⁾ | | 43,238 | 3 | A | \$0.00 | | 1,044,540 | | D | | |
| Common Stock | | | | 02/24/2016 | | | | F ⁽¹⁾ | | 18,138 | 3 | D | \$12.39 | | 1,026,402 | | D | | | |
| Common Stock 0. | | | | 02/24/2016 | | ; | | A ⁽⁴⁾ | | 20,259 | | A | \$0.00 | | 1,046,661 | | D | | | |
| Common Stock 0. | | | | | 016 | 5 | | F ⁽¹⁾ | | 8,498 | | D | \$12.39 | | 1,038,163 | | D | | | |
| Common S | 02/24/20 | 016 | 6 | | | A ⁽⁵⁾ | | 201,776 A | | \$0. | 00 | 1,239,939 | | D | | | | | | |
| | | Та | ble II | - Derivati | | | | • | | • | sed of, o | | | | y Ov | ned | | | | |
| Derivative Security (Instr. 3) | le of 2. 3. Transaction Date Execution Date, if any | | 4. Transac Code (II 8) | tion | | mber ative rities ired sed | | Exercion Day/Y | isable and ite ear) | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | ount | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. Withholding shares solely to cover withholding tax liabilities in connection with the vesting of performance stock units on February 24, 2016.
- 2. On December 24, 2012 (the "Grant Date"), the reporting person was granted performance-based restricted stock units ("PSUs"), the vesting of which was subject to both continued service and the degree to which a relative total shareholder return target was attained for each of the three annual periods commencing on the Grant Date. The acquisition of shares of the Issuer's common stock represents the vesting of PSUs for the performance period ending one year from the Grant Date.
- 3. On February 20, 2013 (the "Grant Date"), the reporting person was granted performance-based restricted stock units ("PSUs"), the vesting of which was subject to both continued service and the degree to which a relative total shareholder return target was attained for each of the three annual periods commencing on the Grant Date. The acquisition of shares of the Issuer's common stock represents the vesting of PSUs for the performance period ending one year from the Grant Date.
- 4. On February 25, 2014 (the "Grant Date"), the reporting person was granted performance-based restricted stock units ("PSUs"), the vesting of which was subject to both continued service and the degree to which a relative total shareholder return target was attained for each of the three annual periods commencing on the Grant Date. The acquisition of shares of the Issuer's common stock represents the vesting of PSUs for the performance period ending one year from the Grant Date
- 5. Award of service-based Restricted Stock Units granted under the Allscripts Healthcare Solutions, Inc. 2011 Stock Incentive Plan on February 24, 2016(the "Grant Date"). The award vests 33% per year on each of the first three anniversaires of the date of grant, subject to achievement of a performance goal for the period ending December 31, 2016.

Remarks

This amendment is being filed to correct an inadvertent error and properly reflect the reported acquired number of securities.

Holly O'Berry by power of attorney for Paul Black

** Signature of Reporting Person Date

02/29/2016

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.