## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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*     Olis Dennis					AI	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [ MDRX ]									Check all a Di	ship of Reporting policable) rector ficer (give title		Person(s) to Issuer  10% Owner Other (specify	
(Last) 222 MER SUITE 20		rst) (I	Middle) A			3. Date of Earliest Transaction (Month/Day/Year) 03/16/2018									A be	chief Fina	ncial (	below) Officer	
(Street) CHICAG	O IL		0654 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8)  4. Securitie Disposed (5)		ties Acquired (A) I Of (D) (Instr. 3, 4			nd Sed Bed Ow	amount of curities neficially ned Following ported	Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	ınt (A) or (D)		Price	Tra	Transaction(s) (Instr. 3 and 4)			(111501. 4)
Common Stock 03/16					/2018	/2018		A <sup>(1)</sup>		18,73	B A \$0		\$0.	00 300,553			D		
Common Stock 03/16					/2018	/2018		D <sup>(2)</sup>		5,490	5,490		\$13	3.17	295,063		D		
	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/Ye	Date,	4. Transaction Code (Instr. 8)		n of		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		/ Di Or Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or	ount nber res					

## **Explanation of Responses:**

- 1. On March 6, 2015 (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 two annual periods commencing three years after the Grant Date.
- $2.\ Withholding\ shares\ solely\ to\ cover\ withholding\ tax\ liabilities\ in\ connection\ with\ the\ vesting\ of\ performance\ stock\ units\ on\ March\ 16,\ 2018.$

## Remarks:

Holly O'Berry by power of attorney for Dennis Olis

03/20/2018

\*\* 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.