#### **Olis Dennis** Form 3 February 14, 2013 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

## **INITIAL STATEMENT OF 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

### (Print or Type Responses)

| 1. Name and Ad<br>Person <u>*</u><br>Olis Denn  |         | porting  | 2. Date of Event Requiring<br>Statement<br>(Month/Day/Year)<br>02/14/2013 | 3. Issuer Name and Ticker or Trading Symbol<br>ALLSCRIPTS HEALTHCARE SOLUTIONS, INC.<br>[MDRX]        |  |                           |  |  |
|---|---------|----------|---|---|--|---------------------------|--|--|
| (Last)  | (First) | (Middle) | 02/1//2010  | <ul><li>4. Relationship of Reporting<br/>Person(s) to Issuer</li><li>(Check all applicable)</li></ul> |  |                           | 5. If Amendment, Date Original Filed(Month/Day/Year)   |  |
| 222 MERCH   |         |          |   |   |  |                           |  |  |
| PLAZA, SUITE 2024<br>(Street)<br>CHICAGO, IL 60654  |         |          |   | Director 10% Owne<br>XOfficer Other<br>(give title below) (specify below)<br>SVP of Operations        |  | Owner                     | <ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> <li>Person</li> <li> Form filed by More than One</li> <li>Reporting Person</li> </ul> |  |
| (City)  | (State) | (Zip)    | Table I - N   | Non-Derivat   | ive Securiti   | es Be                     | neficially Owned   |  |
| 1.Title of Secur<br>(Instr. 4)  | ity     |          | 2. Amount o<br>Beneficially<br>(Instr. 4)                                 |   | 3.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) | 4. Nat<br>Owne<br>(Instr. |  |  |
| Common Sto  | ock     |          | 163,134 <u>(1</u>   | <u>)</u>  | D  | Â                         |  |  |
| Reminder: Repo  | -       |          | ach class of securities benefic   | ially S   | EC 1473 (7-02  | )                         |  |  |
| Persons who respond to the collection of<br>information contained in this form are not<br>required to respond unless the form displays a<br>currently valid OMB control number. |         |          |   |   |  |                           |  |  |

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) | Securities Underlying<br>Derivative Security<br>(Instr. 4) | 4.<br>Conversion<br>or Exercise<br>Price of<br>Derivative | 5.<br>Ownership<br>Form of<br>Derivative<br>Security: | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|---|--|--|---|---|---|
|   |  | Title  | Derivative  | Security:   |   |

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

## Edgar Filing: Olis Dennis - Form 3

| Date        | Expiration | Amount or | Security | Direct (D)  |
|-------------|------------|-----------|----------|-------------|
| Exercisable | Date       | Number of |          | or Indirect |
|             |            | Shares    |          | (I)         |
|             |            |           |          | (Instr. 5)  |

# **Reporting Owners**

| <b>Reporting Owner Name / Address</b>  | Relationships |           |                   |       |  |  |
|--|---------------|-----------|-------------------|-------|--|--|
|  | Director      | 10% Owner | Officer           | Other |  |  |
| Olis Dennis<br>222 MERCHANDISE MART PLAZA<br>SUITE 2024<br>CHICAGO, IL 60654 | Â             | Â         | SVP of Operations | Â     |  |  |
| Signatures   |               |           |                   |       |  |  |
| Holly O'Berry by power of attorney for Dennis Olis                           | 02/14/2013    |           |                   |       |  |  |
| <u>**</u> Signature of Reporting Person                                      | Date          |           |                   |       |  |  |
| — —  |               |           |                   |       |  |  |

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Shares beneficially owned consist of two restricted stock unit awards. The awards vest as to 25% on each of the first four anniversaries of the grant date, November 12, 2012.

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.