#### **OPEN SOLUTIONS INC** Form 4/A

April 15, 2005

### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB** Washington, D.C. 20549 Number:

**OMB APPROVAL** 

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2005

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Common

Stock

12/01/2004

(Print or Type Responses)

1. Name and Address of Reporting Person * HERNANDEZ LOUIS JR  (Last) (First) (Middle)			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
			OPEN SOLUTIONS INC [OPEN]  3. Date of Earliest Transaction							
(=)	()				ansaction			X Director	10%	Owner
C/O OPEN SOLUTIONS INC., 455 WINDING BROOK DRIVE			(Month/Day/Year) 12/01/2004			_X_ Officer (give title Other (specify below) Chairman and CEO				
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year) 12/03/2004				Applicable Line) _X_ Form filed by One Reporting Person			
GLASTON	BURY, CT 06033	3						Form filed by M Person	More than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/E	Date, if	3. Transactic Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4)	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature o Indirect Beneficial Ownership (Instr. 4)

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

 $S^{(1)}$ 

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

 $6,232 \stackrel{(2)}{=}$ 

D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1,000

D

26.75

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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. Transactio Code (Instr. 8)	5.  onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	Amount Underly Securiti	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
HERNANDEZ LOUIS JR C/O OPEN SOLUTIONS INC. 455 WINDING BROOK DRIVE GLASTONBURY, CT 06033	X		Chairman and CEO				

# **Signatures**

/s/ Louis
Hernandez, Jr.

\*\*Signature of Reporting

Date

\*\*Signature of Reporting
Person

## **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).
- (1) The reported sale was effected by a broker transaction pursuant to instructions set forth in a Rule 10b5-1 trading plan adopted by the reporting person.
- This amendment is being filed solely to amend the reporting person's aggregate holdings of common stock following the reported transaction to include 178 shares of common stock acquired under Open Solutions Inc.'s 2003 Employee Stock Purchase Plan (the "2003 Plan") on May 31, 2004 and 171 shares of common stock acquired under the 2003 ESPP on November 30, 2004, which were not previously reported.

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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