FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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* Poulton Richard J.						2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [MDRX]									heck a	ionship of Reporting F all applicable) Director Officer (give title		10%	Person(s) to Issuer 10% Owner Other (specify	
(Last) 222 MEF	Last) (First) (Middle) 222 MERCHANDISE MART					3. Date of Earliest Transaction (Month/Day/Year) 10/29/2015										below))	bek and CFO		
STE. 2024						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															X	Form filed by One Reporting Person				
CHICAG	CAGO IL 60654														Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	⊻ ip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						Execution Date			3. Transac Code (In 8)		4. Securit Disposed and 5)		3, 4 See Be		ially	6. Ownershi Form: Direc (D) or Indirect (I) (Instr. 4)				
									Code V		Amount	(A)) or)	Price	R	Following Reported Transaction(s) (Instr. 3 and 4)		(111501 : 4)	(111541: 4)	
Common Stock 10/29/20						015			F ⁽¹⁾		6,154]	D	\$14.13		254,604		D		
Common Stock 10/29/20						015			F ⁽¹⁾	F ⁽¹⁾ 6,154]	D	\$14.13		248,450		D		
		Та	ble II	- Derivat (e.g., p							sed of, o				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, h/Day/Year)		ransaction ode (Instr.		vative urities uired or oosed O) tr. 3, 4	6. Date Exercisable a Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	8. Prio of Deriva Securi (Instr.	ative Sity B	D. Number of derivative Securities Beneficially Dwned Following Reported Fransaction Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber ires						

Explanation of Responses:

Remarks:

Holly O'Berry by power of attorney for Richard Poulton

10/29/2015

** Signature of Reporting Person

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

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.

^{1.} Withholding shares solely to cover withholding tax liabilities in connection with the vesting of restricted stock units on October 29, 2015.

^{*} 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).