FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

Instruc	tion 1(b).		F							ies Exchang mpany Act o		1934				, po	Сэропэс.	0.0
Name and Address of Reporting Person* Aspinall Mara G.				AL	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [MDRX]							k all app Direc	ship of Reporting F applicable) rector		10% O	wner		
(Last) (First) (Middle) 222 MERCHANDISE MART PLAZA					3. Date of Earliest Transaction (Month/Day/Year) 05/21/2020							Officer (give title below)			Other (below)	specify		
(Street) CHICAC			0654 Zip)	4. If	Amend	lment,	Date o	of Origina	al File	d (Month/Da	y/Year)		6. Indi Line) X	Form	filed by On	ie Rej	ng (Check A porting Pers an One Rep	on
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) Exec		. Deemed ecution Date, any onth/Day/Year)		Transaction Disposed Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) (D)	Pri	се	Transa	ction(s) 3 and 4)			(Instr. 4)
Common Stock 05/21/2				1/2020				A ⁽¹⁾		30,582	A	\$	0.00	83	3,887		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)	ivative Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year)		Code	action (Instr.	of Deriv Secu Acqu (A) o Disp of (D	r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amount of Number of Title Share		De Sei (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)	

Explanation of Responses:

1. Restricted stock units award with vesting that will occur on the one year anniversary of the grant date.

Remarks:

Holly O'Berry by power of attorney for Mara Aspinall

05/22/2020

** 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.