# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number:	3235-0287								
Expires:	December 31, 2014								
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

1. Name and Address of Reporting Person <sup>*</sup> HEWITT JAMES		ng Person <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
	AIVIES		SOLUTIONS, INC. [MDRX]		Director	10% Owner				
(Last) 222 MERCH	(First) ANDISE MAR	(Middle) CT PLAZA	3. Date of Earliest Transaction (Month/Day/Year) 05/20/2015	st Transaction (Month/Day/Year)	Officer (give title below) SVP Develo	Other (specify below) pment				
SUITE 2024			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)				X	Form filed by One Re	porting Person				
CHICAGO	IL	60654			Form filed by More th Person	an One Reporting				
(City)	(State)	(Zip)								
		Table I - Non-De	erivative Securities Acquired, Disposed of, or Bene	ficially	Owned					

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (In 8)		4. Securities Disposed Of and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(1150.4)	(1150.4)
Common Stock	05/20/2015		<b>F</b> <sup>(1)</sup>		30,444	D	\$14.22	250,664	D	

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

(e.g., pu					buts, cans, 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/Year)	4. Transact Code (In 8)		of E		6. Date Exer Expiration D (Month/Day/	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

### Explanation of Responses:

1. Withholding shares solely to cover withholding tax liabilities in connection with the vesting of restricted stock units on May 20, 2015.

**Remarks:** 

Holly O'Berry by power of attorney for James Hewitt

05/22/2015

\*\* 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.