FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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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 an Farley	ALL SOL	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [ MDRX ]  3. Date of Earliest Transaction (Month/Day/Year)									Check X	all app Direct Office below	cer (give title ow)		10% C Other below)	Owner (specify						
222 MERCHANDISE MART PLAZA SUITE 2024						02/24/2016  4. If Amendment, Date of Original Filed (Month/Day/Year)										SVP Gerneral Counsel & Corpora  6. Individual or Joint/Group Filing (Check Applicable Line)						
	CHICAGO IL 60654					02/26/2016									X	,						
(City)	(51)			Jan Daniu	-4:		!4!			D:			Dan		-11	<b></b>						
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/					on 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquire Disposed Of (D) (Instrant 5)				d (A)	or	5. Amount of Securities I Beneficially Owned		For (D) Indi	Ownership m: Direct or irect (I) str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) or (D)		Price	,	Reported Transaction(s) (Instr. 3 and 4)		(111011. 7)		(111301. 4)					
Common	02/24/2	2016				A <sup>(1)</sup>		52,462	2	A	\$0.00		155,967			D						
Common Stock 02/24/2						016					2,383		D	\$12.39		153,584			D			
Common Stock 02/24/20						016			A <sup>(3)</sup>		4,051		A	\$0.00		157,635		D				
Common Stock 02/24/2					016				F <sup>(2)</sup>		1,223	3 D \$		\$12	.39	156,412			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)	f 2. 3. Transaction 3A. Deemed		4. Transac Code (Ir 8)	tion	_	mber rative rities ired r osed	Date Exercisable and Expiration Date Expiration Date Exercisable Expiration Date			Amount of Securities Underlying Derivative Security (Inst 3 and 4)		ount	8. Price of Derivati Security (Instr. 5		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## Explanation of Responses:

- 1. Award of service-based Restricted Stock Units granted under the Allscripts Healthcare Solutions, Inc. 2011 Stock Incentive Plan on February 24, 2016(the "Grant Date"). The award vests 33% per year on each of the first three anniversaires of the date of grant, subject to achievement of a performance goal for the period ending December 31, 2016.
- 2. Withholding shares solely to cover withholding tax liabilities in connection with the vesting of performance stock units on February 24, 2016.
- 3. On February 25, 2014 (the "Grant Date"), the reporting person was granted performance-based restricted stock units ("PSUs"), the vesting of which was subject to both continued service and performance measure of a combination of 50% non-GAAP adjusted EBITDA and 50% non-GAAP revenue targets were attained for each of the three annual periods commencing on the Grant Date. The acquisition of shares of the Issuer's common stock represents the vesting of PSUs for the performance period ending one year from the Grant Date.

## Remarks:

This amendment is being filed to correct an inadvertent error and properly reflect the acquired number of securities.

Holly O'Berry by power of attorney for Brian Farley

02/29/2016

\*\* 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.