FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and A MCGRAW LA		porting Person [*]	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. [MDRX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 222 MERCHA 2024	(First) NDISE MART	(Middle) PLAZA, SUITE	3. Date of Earliest Transaction (Month/Day/Year) 11/28/2011	x	Director Officer (give title below) Chief Client	10% Owner Other (specify below) Officer		
(Street) CHICAGO (City)	IL (State)	60654 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	(Che X Fo Fo	dividual or Joint/G ck Applicable Line orm filed by One F orm filed by More f eporting Person	eporting Person		

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)	3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)				ed of (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)		
Common Stock	11/28/2011		М		31,175	Α	\$ 5.09	355,252	D			
Common Stock	11/28/2011		S		17,927	D	\$ 19.14 ⁽¹⁾	337,325	D			
Common Stock	11/28/2011		М		41,567	Α	\$ 4.57	378,892	D			
Common Stock	11/28/2011		S		23,228	D	\$ 19.14 ⁽¹⁾	355,664	D			
Common Stock	11/28/2011		М		20,784	Α	\$ 5.13	376,448	D			
Common Stock	11/28/2011		S		11,978	D	\$ 19.14 ⁽¹⁾	364,470	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8)		Der Sec (A) Disj of (I (Ins	posed			mount of Der nderlying Sec ecurities (Ins		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$ 5.09	11/28/2011		м			31,175	12/30/2006	12/30/2014	Common Stock	31,175	\$0	0	D	
Employee Stock Option (right to buy)	\$ 4.57	11/28/2011		м			41,567	04/01/2004	04/01/2014	Common Stock	41,567	\$0	0	D	
Employee Stock Option (right to buy)	\$ 5.13	11/28/2011		м			20,784	12/31/2006	12/31/2014	Common Stock	20,784	\$0	0	D	

Explanation of Responses:

1. Sale made to cover withholding taxes and the option exercise price of the security. This transaction was executed in multiple trades at prices ranging from \$19.10 to \$19.19. The price reported reflects the average sale price on the transaction date. The reporting person hereby undertakes

Kathie Kittner by power of
attorney for Laurie McGraw11/29/2011** Signature of Reporting
PersonDate

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.