SEC For	m 5																
	FORM	TES SEC	ES SECURITIES AND EXCHANGE COMMISSION												1		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			Washington, D.C. 20549 ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP									11	OMB APPROVAL OMB Number: 3235-0362 Estimated average burden				
Form 3 Holdings Reported.				OWNERGH									hou	urs per re	esponse:		1.0
Form 4	Transactions	Reported.	Filed	l pursuant to So or Section 3													
	nd Address of 1 Richard	Reporting Persor	1*	2. Issuer Name and Ticker or Trading Symbol <u>ALLSCRIPTS HEALTHCARE</u> <u>SOLUTIONS, INC.</u> [MDRX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify				er		
(Last) 222 MEI STE. 202	(Fir RCHANDIS 24	,	(Middle)	e) Delow)								,	lent &	belo CFO	w)		
(Street) CHICAC (City)			60654 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)								 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 					
		Table	e I - Non-Deriva	ative Secur	rities	s Acc	quire	d, Dis	posed	of, or	Benefic	ially Own	ed				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquire Of (D) (Instr. 3, 4 and			\) or Dispose	ed 5. Amount of Securities Beneficially Owned at end		6. Ownership Form: Direc of (D) or		7. Nature of Indirect Beneficial Ownership	
										(A) or (D)	Price	Issuer's	Issuer's Fiscal Year (Instr. 3 and		Indirect (I) (Instr. 4)		(Instr. 4)
Common Stock			11/22/2021			G		27,502		D	\$0.00	541	541,593		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)		of Deriv Secu Acqu (A) o Disp of (D	r osed) r. 3, 4	Expira (Mont	te Exerc ation Da th/Day/Y		Am Sec Un Der Sec 3 a	Fitle and oount of countities derlying rivative courity (Instr. nd 4) Amount or Number of Shares	8. Price of Derivative Security (Instr. 5) 9. Numb derivative Securitie Beneficio Owned Followin Reportee Transact (Instr. 4)		ve es ially ng d tion(s)	10. OwnersH Form: Direct (C or Indire (I) (Instr.	nip o B) C ct (I	1. Nature f Indirect Seneficial Ownership Instr. 4)

Explanation of Responses:

Remarks:

<u>Holly O'Berry by power of</u> <u>attorney for Richard Poulton</u>

02/11/2022

** 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.