Edgar Filing: THURMAN RANDY H - Form 4

THURMAN RA	ANDY H											
Form 4 May 23, 2013												
•	л								OMB A	PPROVAL		
FORM	UNITED	Washington, D.C. 20549										
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instructi 1(b).	STATEN Filed pur e. Section 17(STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940								Expires:January 31, 2005Estimated average burden hours per response0.5		
(Print or Type Res	ponses)											
THURMAN RANDY H Syn AI			2. Issuer Symbol ALLSC SOLUT		IEALTH	(CAR	-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D 222 MERCHANDISE MART 05/21/20 PLAZA, SUITE 2024				-				X_ Director 10% Owner Officer (give title Other (specify below) below)				
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO, IL	2 60654							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-l	Derivativ	Secur	ities Acc	quired, Disposed of	f, or Beneficial	lly Owned		
	2. Transaction Dat Month/Day/Year)	Executio any	med on Date, if Day/Year)	Code	ion(A) or (D) (Instr. (Dispose 6, 4 and (A) or	5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock 0)5/21/2013			A <u>(1)</u>	14,22		\$0	36,524	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
THURMAN RANDY H 222 MERCHANDISE MART PLAZA SUITE 2024 CHICAGO, IL 60654	Х					
Signatures						
Kathie Kittner by power of attorney for Thurman	05/23/2013					
<u>**</u> Signature of Reporting Person			Date			
Explanation of Deenen	0001					

Explanation of Responses:

- * 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).
- (1) Restricted stock unit award with vesting that will occur in twelve (12) equal monthly installments, commencing in June, 2013. Distribution of the vested units is deferred pursuant to the Allscripts Healthcare Solutions, Inc. Director Deferred Compensation Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.