

ALLSCRIPTS HEALTHCARE SOLUTIONS, INC.

Form 4

November 29, 2011

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 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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
MCGRAW LAURIE

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) (First) (Middle)
222 MERCHANDISE MART
PLAZA, SUITE 2024

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
11/28/2011

___ Director ___ 10% Owner
 Officer (give title below) ___ Other (specify below)
Chief Client Officer

CHICAGO, IL 60654

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

(City) (State) (Zip)

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. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				(A) or (D)	Price		
Common Stock	11/28/2011		M	31,175	A \$ 5.09	355,252	D
Common Stock	11/28/2011		S	17,927	D \$ 19.14	337,325	D
Common Stock	11/28/2011		M	41,567	A \$ 4.57	378,892	D
Common Stock	11/28/2011		S	23,228	D \$ 19.14	355,664	D

Common Stock	11/28/2011		M	20,784	A	\$ 5.13	376,448	D
Common Stock	11/28/2011		S	11,978	D	\$ 19.14 <u>(1)</u>	364,470	D

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

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 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		M	31,175	12/30/2006 12/30/2014	Common Stock 31,175
Employee Stock Option (right to buy)	\$ 4.57	11/28/2011		M	41,567	04/01/2004 04/01/2014	Common Stock 41,567
Employee Stock Option (right to buy)	\$ 5.13	11/28/2011		M	20,784	12/31/2006 12/31/2014	Common Stock 20,784

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other
Chief Client Officer

MCGRAW LAURIE
222 MERCHANDISE MART PLAZA, SUITE 2024
CHICAGO, IL 60654

Signatures

Kathie Kittner by power of attorney for Laurie
McGraw

11/29/2011

__Signature of Reporting Person

Date

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).

Sale made to cover withholding taxes and the option exercise price of the security. This transaction was executed in multiple trades at
(1) 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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.
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