Edgar Filing: ALLSCRIPTS HEALTHCARE SOLUTIONS, INC. - Form 4

ALLSCRIPTS HEALTHCARE SOLUTIONS, INC.

Form 4

February 22, 2011

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

Form 4 or Form 5 obligations may continue. See Instruction

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

burden hours per response... 0.5

OMB APPROVAL

1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading SHAPIRO LEE Issuer Symbol ALLSCRIPTS HEALTHCARE (Check all applicable) SOLUTIONS, INC. [MDRX] 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction Director X_ Officer (give title Other (specify (Month/Day/Year) below) 222 MERCHANDISE MART 02/18/2011 President and Secretary PLAZA, SUITE 2024 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting CHICAGO, IL 60654

(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. Transactic Code (Instr. 8)	4. Securitie onor Dispose (Instr. 3, 4) Amount	d of (Ľ))	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)	
Common Stock	02/18/2011		M <u>(1)</u>	147,794	A	\$ 2.71 \$	557,733	D		
Common Stock	02/18/2011		S <u>(1)</u>	125,000	D	20.67 (2)	434,897 (3)	D		

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

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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. Transactio Code (Instr. 8)	5. Number of actionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
	·			Code V	5) (A)	(D)	Date Exercisable	Expiration Date	Title	Amount on Number of Shares
Stock Option	\$ 2.71	02/18/2011		M(1)		147,794	03/01/2005	03/01/2011	Common Stock	147,79

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SHAPIRO LEE

222 MERCHANDISE MART PLAZA, SUITE 2024 CHICAGO, IL 60654

President and Secretary

Signatures

Kathie Kittner by power of attorney for Lee Shapiro

02/22/2011

**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).
- (1) This exercise and sale was effected pursuant to a 10b5-1 plan adopted by the reporting person in December 2010.
- These transactions were executed in multiple trades at prices ranging from \$20.42 to \$21.31 The prices reported reflect the weighted (2) average sale price on the transaction date. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- (3) The beneficial ownership number includes 2,164 shares obtained through the reporting person's involvement in the Company's Employee Stock Purchase 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.

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