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Form 4 December 17,										
									OMB APPROVAL	
FORM	Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287
Check this if no longe subject to Section 16 Form 4 or	er STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: Estimated a burden hour response	•	
Form 5 obligations may contin <i>See</i> Instruct 1(b).	s Section 17(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 Ro	esponses)									
JUDGE JONATHAN Sy A			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 MERCH PLAZA	3. Date of Earliest Transaction (Month/Day/Year) 12/14/2018					X_ Director 10% Owner Officer (give title Other (specify below) below)				
				nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
CHICAGO,	IL 60654							Form filed by Mo Person		
(City)	(State)	(Zip)	Table	I - Non-I	Derivative	Secur		uired, Disposed of,	or Beneficiall	ly Owned
	2. Transaction Date Month/Day/Year)	2A. Deemed Execution I any (Month/Day	d G Date, if G (y/Year) (3. Fransactio Code	4. Securit nor Dispos (Instr. 3, -	ties Ac	cquired (A) (D)	· - ·	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial
Common Stock	12/14/2018			P <u>(1)</u>	9,622	A	\$ 10.3763	57,465	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)

Disposed of (D) (Instr. 3, 4, and 5) Date Expiration Title Number Exercisable Date Code V (A) (D) **Reporting Owners Relationships Reporting Owner Name / Address** Director 10% Owner Officer Other

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4.

Code

(Instr. 8)

Execution Date, if

(Month/Day/Year)

5.

of

Derivative

Securities

Acquired

(A) or

TransactionNumber

6. Date Exercisable and

Expiration Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Amount or

of

Shares

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

Bene

Own

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Repo

Trans

(Insti

JUDGE JONATHAN 222 MERCHANDISE MART PLAZA CHICAGO, IL 60654

Signatures

1. Title of

Security

(Instr. 3)

Derivative

2

Conversion

or Exercise

Derivative

Price of

Security

Holly O'Berry by power of attorney for Jonathan Judge

**Signature of Reporting Person

Date

12/17/2018

Explanation of Responses:

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

These transactions were executed in multiple trades at prices ranging from \$10.335 to \$10.40. The prices reported reflect the weighted (1) 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 transactions were effected.

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.