

ALLSCRIPTS HEALTHCARE SOLUTIONS INC  
 Form 4  
 August 08, 2006

**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 \*  
 TULLMAN GLEN

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 PLAZE,  
 SUITE 2024  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 08/04/2006

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 Chief Executive 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)
			Code	V	Amount	(D)	Price
Common Stock	08/04/2006		M		118,250	A	\$ 0.06 553,431 <sup>(1)</sup>
Common Stock	08/04/2006		S		118,250	D	\$ 21 435,181 <sup>(1)</sup>
Common Stock	08/04/2006		M		11,898	A	\$ 0.06 447,079 <sup>(1)</sup>
Common Stock	08/04/2006		S		11,898	D	\$ 21 435,181 <sup>(1)</sup>
Common Stock	08/04/2006		S		5,148	D	\$ 21.7 430,033 <sup>(1)</sup>

Common Stock	08/04/2006	S	26,600	D	\$ 21.45	403,433 <sup>(1)</sup>	D
Common Stock	08/04/2006	S	80,158	D	\$ 21	323,275 <sup>(1)</sup>	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 Number Shares
Employee Stock Option (right to buy)	\$ 0.06	08/04/2006		M	118,250	08/01/2000 05/29/2008	Common Stock	118,250	
Employee Stock Option (right to buy)	\$ 0.06	08/04/2006		M	11,898	08/01/2000 05/28/2008	Common Stock	11,898	

## Reporting Owners

### Reporting Owner Name / Address

### Relationships

Director 10% Owner Officer Other

TULLMAN GLEN  
222 MERCHANDISE PLAZE, SUITE 2024  
CHICAGO, IL 60654

Chief Executive Officer

## Signatures

Jena Kluska for Glen Tullman by Power of Attorney

08/08/2006

\_\_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) Amount of securities beneficially owned includes 29,091 shares of unvested restricted stock granted on January 17, 2006, under the Allscripts Healthcare Solutions, Inc. 1993 Stock Incentive Plan.

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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