FORM 4

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

OMB APPRO	VAL
OMB Number:	3235-028
Estimated average bu	rden
houre per reenonce	0

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 or Section 30(h) of the Investment Company Act of 1940

	pe Response	s)														
1. Name and Address of Reporting Person* Kitayama Mitchell W					2. Issuer Name and Ticker or Trading Symbol Apollo Medical Holdings, Inc. [AMEH]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 2120 MORNINGSIDE AVENUE (Street) UPLAND, CA 91784 (City) (State) (Zip)					Date of Earliest Transaction (Month/Day/Year) 11/25/2019 High Amendment, Date Original Filed(Month/Day/Year)							Officer (give title below) Other (specify below) 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
				4. If A							_X_ F					
		(State)				-						•		cially Owned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						e, if	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(D) Own Trans	Owned Following Transaction(s)			Ownership Form:	Beneficial
			(Moi	nth/Day/Y	ear)	Code	V A	mount	(A) or (D) I	(Instr	nstr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
			Table	II Dowl	watiwa Can				•							
1. Title of 2. 3. Transaction Derivative Conversion Date Sexecution Date, if							ate of U Month/Day/Year) Sec				Owned Sitle and Amount Juderlying 8. Price of Derivative		n displays a	of 10. Ownersh Form of Derivativ		
Derivative Security	Conversion or Exercise Price of	Date	3A. Deemed Execution Date, if any	4. Transac Code	5. Nu of Deriv Securi	mber vative	es Acquired rrants, opt r 6. Date I Date	I, Dispo ions, con Exercisal	sed of, on twertible and l	or Benefic le securitio	7. Title ar	nd Amount lying	Derivative Security	Securities Beneficially	Ownersl Form of Derivati	Beneficia Ownershi
Derivative Security	Conversion or Exercise	Date	3A. Deemed Execution Date, if any	4. Transac Code	puts, calls 5. Nu of Deriv	rative rative rities ired r osed	rrants, opt r 6. Date 1 Date (Month/	I, Dispo ions, con Exercisal	sed of, on twertible and l	or Benefic le securitio	7. Title ar	nd Amount lying	Derivative Security	Derivative Securities	Ownersl Form of Derivati Security Direct (I or Indire	of Indirect Beneficia Ownershi (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	tion of Deriv Securi Acqu (A) o Dispo of (D (Instr	rative rative rities ired r osed	es Acquirec rrants, opt r 6. Date 1 Date (Month/	I, Dispo ions, cor Exercisal Day/Yea	sed of, onvertible and I	or Benefic le securitio	7. Title ar	nd Amount lying	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction(Ownersl Form of Derivati Security Direct (I or Indirects)	of Indirect Beneficia Ownershi (Instr. 4)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Kitayama Mitchell W 2120 MORNINGSIDE AVENUE UPLAND, CA 91784	X					

Signatures

/s/ by Omar Dabuni as attorney-in-fact for Mitchell W. Kitayama	12/23/2019
**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) The Issuer granted the above options to Reporting Person in consideration for the Reporting Person's services to the Issuer. Such stock options vest in four (4) equal installments on February 25, 2020; May 25, 2020; August 25, 2020; and November 25, 2020.

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.