FORM 4

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

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

(Print or Type Responses) 1. Name and Address of Reporting Person * Fawcett Mark			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						
	11pono 1/10dio			f Earliest T	t Transaction (Month/Day/Year)						e title below)		o Owner er (specify belo	v)	
(Street) CONCORD, MA 01742			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person				e)	
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acqu				Acquired	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execution any	A. Deemed Execution Date, if	(Instr. 8)	(/	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		f (D) Own Trai	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		d	Ownership of Form:	'. Nature of Indirect Beneficial	
				(Month/Day/Year)		Code	VA		A) or (D)	(Ins	r. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	
Commor	Stock		05/06/2020			M	2	0,000 A		\$ 5 30,	000			D	
Reminder:	Report on a s	separate line for each	h class of securities				Persons in this f displays	s who res orm are n s a currer	not rea	quired to alid OMB	respond control r	unless the	ion contair form	ed SEC	474 (9-02)
1. Title of	•	3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., put 4. Transact Code	ve Securit s, calls, wa 5. Nur of Der Securi Acqui or Dis of (D) (Instr.	ies Acquirarrants, of mber rivative ities (Misposed) 3, 4,	Persons in this f displays	s who res orm are n s a currer sed of, or l avertible so reisable and	Benefi	quired to alid OMB icially Ow	respond control r ned l Amount ing	unless the umber.	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownersh Form of Derivating Security Direct (I or Indire	11. Naturip of Indire Benefici Ownersl (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., put 4. Transact Code	ve Securit s, calls, wa 5. Nun of Der Securi Acqui or Dis of (D)	ies Acquirarrants, of the control of	Persons in this for displays red, Dispondions, control of the Exercise Expiration I	s who resorm are no s a currer sed of, or note that are noted to the sed of sed	Beneficecurit	quired to alid OMB icially Ow ties) 7. Title and of Underly Securities	respond control r ned l Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	f 10. Ownersh Form of Derivating Security Direct (I or Indire	11. Nature of Indire Benefici Owners! (Instr. 4)

Reporting Owners

Described On November 1	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Fawcett Mark 55 RIDGE ROAD CONCORD, MA 01742	X				

Signatures

/s/ by Mark Fawcett	05/21/2020
**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) These stock options were granted on September 14, 2016, and vested and became exercisable in twelve equal monthly installments commencing on October 14, 2016.

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.