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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * Hosseinion Warren				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) C/O 1668 S. GARFIELD AVE., 2ND FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 06/14/2018							Year)		X Officer (give title below) Other (specify below)  Co-Chief Executive Officer					
(Street) ALHAMBRA, CA 91801				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)	(Z	Ľip)			Table	I - N	lon-l	Derivati	ve S	ecurities	Acqui	red, Disp	osed of, or E	Beneficially (	Owned	
(Instr. 3) Date		Date	ransaction e nth/Day/Year)		Deemed ation Date,	if Co	Code (Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	int of Securities ally Owned Following d Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial		
				(Mont	nth/Day/Year)		Code		V Amo	ount	(A) or (D)	Price	(Instr. 3 a	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		06/14/2	2018				S		20,0	000	11)	\$ 16.35	837,338	3		D	
				Гable II - Г	Deriva	ntive Secu	ities A	Acqu	th	ne form	dis	plays a	currer	ntly valid		pond unles		
1 77'4 6	l <sub>a</sub>	2 75 4		(4	<i>e.g.</i> , p	uts, calls,	warra		opti	ons, con	verti	ble secu	rities)		0 D : C	0 N 1	6 10	11.37.
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day)	Execution Da Year) any		te, if Transaction Code Year) (Instr. 8)		of Der Sec Acc (A) Dis of (	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Undo Secu	ttle and bunt of erlying urities r. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)	
						Code	/ (A)	(E	E	Date Exercisal		Expiration Date	n Title	Amount or Number of Shares				

#### **Reporting Owners**

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Hosseinion Warren C/O 1668 S. GARFIELD AVE. 2ND FLOOR ALHAMBRA, CA 91801	X		Co-Chief Executive Officer						

## **Signatures**

Warren Hosseinion	06/15/2018
**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).

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.