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

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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

( )	pe Response													
1. Name and Address of Reporting Person * Schmidt David			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) 1668 S. GARFIELD AVENUE, 2ND FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 01/20/2022							ve title below)	Oth	er (specify belo	ow)	
(Street) ALHAMBRA, CA 91801			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acq				es Acquire	uired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)				2A. Deemed Execution Date r) (Month/Day/Ye		f Coo (Ins	le (tr. 8)	Amount (A) or (D)	of (D) Or Tr	Amount of twned Follow ransaction(s) nstr. 3 and 4	ving Reporte	ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
								ned in this for		•				
							form d	isplays a curr	rently vali reficially O	id OMB co				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security			4. Transact	5. No of Der Sec Acc (A) Dis	warrar fumber ivative urities uired or posed	form d cquired, Disp ts, options, c 6. Date Exe Expiration	osed of, or Ben onvertible secu ercisable and Date	rently valineficially O	owned  nd Amount lying s	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported	Ownersl Form of Derivati Security Direct (I or Indire	ve Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	5. No. of Der Sec Acc (A) Dis of (	fumber ivative urities uired or posed D)	form d cquired, Disp ts, options, c 6. Date Exe Expiration (Month/Da	osed of, or Ben onvertible secu ercisable and Date	rently valideficially Orities)  7. Title and of Underly Securities	owned  nd Amount lying s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	Ownersl Form of Derivati Security Direct (I or Indire	hip of Indir Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	5. No of Der Sec Acc (A) Dis of (Ins	fumber ivative urities uired or cosed D) tr. 3, 4	dequired, Disputs, options, control of the Exercisable Exercisable	isplays a currence of the convertible secure excisable and Date (y/Year)	rently valideficially Orities)  7. Title and of Underly Securities	owned  nd Amount lying s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	Ownersl Form of Derivati Security Direct (I or Indirects)	hip of Indir Benefic Owners (Instr. 4

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Schmidt David 1668 S. GARFIELD AVENUE 2ND FLOOR ALHAMBRA, CA 91801	X				

## **Signatures**

/s/ David G. Schmidt	01/24/2022
**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)
- (  $\bf{1}$ ) The option vests in four equal quarterly installments from January 18, 2022.

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.