# FORM 4

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

OMB APPROV	/AL
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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*  DATES EDNEST A				2. Issuer Name and Ticker or Trading Symbol				5. Rel	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BATES ERNEST A			Apollo Medical Holdings, Inc. [AMEH]					XDirector10% Owner Officer (give title below) Other (specify below)						
FOUR EMBARCADERO CENTER 3620				3. Date of Earliest Transaction (Month/Day/Year) 01/11/2019					omeer (give	titic below)	Other (	specify below)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)				_X_ Fo:	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person					
SAN FRANCISCO, CA 94111 (City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1 Title of S	acurity		2. Transaction	2A D	Deemed		1	Securities Acqui			curities Ben		17	Nature
1. Title of Security (Instr. 3)		Date (Month/Day/Year	Execu any	ution Date	if Co	ode (A	or Disposed of ostr. 3, 4 and 5)	D) Owned Following Transaction(s)			O Fo	Ownership of Form:	Indirect eneficial	
				(Mon	th/Day/Ye	ar)		(A) or	Ì	3 and 4)		or (I)	Indirect (In	vnership str. 4)
							Code V At	nount (D)	Price			(li	nstr. 4)	
Reminder:	Report on a .						Persons	who respond	to the colle	ection of	information	on contained	SEC 14,	74 (9-02)
Reminder:	report on a .		Table II				in this for a current	orm are not red tly valid OMB sed of, or Benefi	quired to re control nur icially Owner	spond u mber.				74 (9-02)
1. Title of	·	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	(e.g., p 4. Transac Code	buts, calls 5. N ction of Deri Sect Acq (A) of Disp of (I	warranber wative rities nired or osed 0) r. 3, 4,	in this for a current Acquired, Disposants, options, con	orm are not rectly valid OMB sed of, or Beneficertible securitable and	quired to re control nur icially Owner	espond umber.  d  Amount	8. Price of	form displays	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	(e.g., p 4. Transac Code	buts, calls  5. N ction of Deri Sect Acq (A) Disp of (I (Inst	warramber vative rities nired or osed 0) r. 3, 4,	in this for a current Acquired, Disposants, options, con 6. Date Exercisa Expiration Date (Month/Day/Year)	orm are not rectly valid OMB sed of, or Beneficertible securitable and	cially Owner ies)  7. Title and of Underlyi Securities	espond umber.  d  Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Natur of Indirec Beneficia Ownersh

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BATES ERNEST A FOUR EMBARCADERO CENTER 3620 SAN FRANCISCO, CA 94111	X				

### **Signatures**

/s/ ERNEST A. BATES	01/15/2019
**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 these options to Dr. Bates in consideration for his service as a director. They vest in 4 installments over one year quarterly on March 31, June 30, September 30 and December 31.

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.