# FORM 5

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

OMB APPF	ROVAL
OMB Number:	3235-0362
Estimated averag	e burden
haira nas saanan	. 10

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

## ANNUAL 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

Name and Address of Reporting F Augusta Gary	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) 700 NORTH BRAND BLVD	(Middle)	3. Statement for Iss (Month/Day/Year) 01/31/2013	r Ended			Officer (give title below)	below)		
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line)			
GLENDALE, CA 91203						_X_ Form Filed by One Reporting Person Form Filed by More than One Reporti			
(City) (State)	(Zip)	Tab	ole I - Non-Deri	ivative Se	curities	Acqui	red, Disposed of, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if				of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership
				Amount (D) Price		Price		(Instr. 4)	
Common Stock							1,450,000	D	
Common Stock							266,000	I	Securities owned by Spagus Capital Partners LLC, an LLC of which Mr. Augusta is a member

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 2270 (9-02)

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	5. Numbor of Derive Securi Acqui (A) or Dispo of (D) (Instr. 4, and	ative ities ired : sed			7. Tit Amou Under Secur (Instr 4)	int of rlying	Derivative Security (Instr. 5)	of Derivative Securities Beneficially Owned at End of	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial	
					(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

Augusta Gary 700 NORTH BRAND BLVD. SUITE 450 GLENDALE, CA 91203	X				
--	---	--	--	--	--

#### **Signatures**

/s/ Gary Augusta	08/06/2013
***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 provided 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.