Apollo Medical Holdings, Inc. Form 5 Augu FC

August 06, 20	013										
FORM 5							OMB APPROVAL				
	UNITED S	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0362			
Check this box if no longer subject			vv as	nington, D.	C. 20545	•		Expires:	January 31, 2005		
5 obligations may continue.		TATEMENT OF CHANGES IN BENEFI OWNERSHIP OF SECURITIES				IEFICIAL	Estimated a burden hou response	average rs per			
See Instruction1(b).Form 3 HoldingsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionReportedForm 430(h) of the Investment Company Act of 1940TransactionsReported											
1. Name and Address of Reporting Person <u>*</u> NIHALANI SURESH			2. Issuer Name <b>and</b> Ticker or Trading Symbol Apollo Medical Holdings, Inc. [AMEH]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M	liddle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/31/2011			r Ended	X Director Officer (give below)		Owner er (specify		
450 NORTH BRAND BOULEVARD											
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
GLENDALI	E, CA 91203					_X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person					
(City)	(State) (	Zip)	Table	e I - Non-Deri	vative Sec	urities Ac	quired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	4. Securit Acquired Disposed (Instr. 3, Amount	(A) or of (D)	Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Common Â Stock

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

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E I S Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
NIHALANI SURESH 450 NORTH BRAND BOULEVARD GLENDALE, CA 91203	X	Â	Â	Â		
Signatures						
/s/ Suresh 08/06/2013						

Nihilani	08/06/2013
<u>**</u> 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.