## Edgar Filing: Hosseinion Warren - Form 4

Form 4	w arren										
August 31, 2										PROVAL	
FORM	14 UNITED	STATES					NGE C	OMMISSION	OMB OMB Number:	3235-0287	
Check th if no long subject to	state	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31 2005 verage	
Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	r Filed pu <sup>ns</sup> Section 17	SECURITIES       burden hours per response         Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,         Section 17(a) of the Public Utility Holding Company Act of 1935 or Section         20(b) of the Investment Company Act of 1940									
(Print or Type I	Responses)										
4			Symbol	r Name <b>and</b>			g	5. Relationship of Reporting Person(s) to Issuer			
			Apollo Medical Holdings, Inc. [AMEH]					(Check all applicable)			
C/O 1668 S. GARFIELD (			3. Date of Earliest Transaction (Month/Day/Year) 08/29/2018					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Co-Chief Executive Officer			
AVE., 2ND			4 TC A								
	(Street)		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			
ALHAMBR	RA, CA 91801							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	any		n Date, if	3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	08/29/2018			S	15,000	D	\$ 16.03	707,338	D		
Common Stock	08/30/2018			S	7,900	D	\$ 15.76	699,438	D		

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.

## Edgar Filing: Hosseinion Warren - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

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

/s/ Warren Hosseinion 08/31/2018 <u>\*\*</u>Signature of Date Reporting Person

## **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.