Apollo Medical Holdings, Inc. Form 5 August FO

August 06, 2	2013						
FORM	15					OMB AI	PPROVAL
-	UNIT	TED STATE	S SECURITIES AND		COMMISSION	OMB Number:	3235-0362
Check th no longer			Washington, D.	Washington, D.C. 20549			
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction						Estimated average burden hours per response 1.0	
1(b). Form 3 F Reported Form 4 Transacti Reported	Holdings Section	17(a) of the	Section 16(a) of the Section 16(b) of the Section 16(b) of the Investment Con	Company Act o	f 1935 or Section	1	
	Address of Repo I SURESH	rting Person <u>*</u>	2. Issuer Name <b>and</b> Ticke Symbol Apollo Medical Holo [AMEH]	C C	5. Relationship of I Issuer (Check	Reporting Pers	
(Last)	(First)	(Middle)	3. Statement for Issuer's F (Month/Day/Year) 01/31/2012	Fiscal Year Ended	_X_ Director Officer (give t below)	title $\frac{10\%}{\text{below}}$ Other	o Owner er (specify
450 NORT BOULEVA			0115112012				
	(Street)		4. If Amendment, Date O Filed(Month/Day/Year)	riginal	6. Individual or Joi	int/Group Rep	
					(eneer		,
GLENDAI	LE, CA 91	203			_X_ Form Filed by C Form Filed by M Person		
(City)	(State)	(Zip)	Table I - Non-Deriv	vative Securities Acc	quired, Disposed of,	, or Beneficial	ly Owned
1.Title of		Date 2A. Dee	emed 3.	4. Securities	5. Amount of 6.		. Nature of

1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities		5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if	Transaction	Acquired (A) or		Securities	Ownership	Indirect	
(Instr. 3)		any	Code	Disposed of (D)		Beneficially	Form: Direct	Beneficial	
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned at end	(D) or	Ownership	
							of Issuer's	Indirect (I)	(Instr. 4)
					(A)		Fiscal Year	(Instr. 4)	
					or		(Instr. 3 and		
				Amount	(D)	Price	4)		
Common	_								_
	Â	Â	Â	Â	Â	Â	400,000	D	Â
Stock									
Common	Â	Â	Â	Â	Â	Â	400,000	Ι	Shares held
Stock				11	11	11	100,000	•	by The
STOCK									•
									Shining Star
									Trust, a trust
									of which

of which Mr/ Nihilani

is a trustee and beneficiary

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

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless (9-02)the form displays a currently valid OMB control number.

## 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)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde: Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Add	Relationships						
FB	Director	10% Owner	Officer	Other			
NIHALANI SURESH 450 NORTH BRAND BOULE GLENDALE, CA 91203	VARD	ÂX	Â	Â	Â		
Signatures							
/s/ Suresh 08/0	)6/2013						

/s/ Suresh Nihilani	08/06/201			
<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.