FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL				
OMB Number:	3235-0287				
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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).

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 Person* WHEAT DOUGLAS D (Last) (First) (Middle)						2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN										all app	olicable) etor er (give title		Owner r (specify	
180 STATE STREET SUITE 230						3. Date of Earliest Transaction (Month/Day/Year) 02/21/2017														
(Street) SOUTHLAKE TX 76092 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										. Indiv ine) X	′				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Da					(Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Secu		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(<i>A</i>	() or ()	Price	•	Transa	action(s) 3 and 4)		(,	
Common Stock 02					02/21/2017				S		5,532	!	D \$41.6		.62		0	D		
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)			Date,	4. Transaction Code (Instr. 8)		n of Deriv Secu Acqu (A) o Dispo of (D	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exercisable and Expiration Date Month/Day/Year) Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of			ice of vative rity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Remarks:

/s/ Denise L. Jackson, as attorney-in-fact on behalf of

02/22/2017

Douglas D. Wheat

** Signature of Reporting Person Date

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

- * 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.

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 Number.