FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

1. Name and Address of Reporting Person* <u>Henderson Ralph</u>							2. Issuer Name <b>and</b> Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN								heck all ap Dire			o Issuer 6 Owner er (specify
(Last) (First) (Middle) 12400 HIGH BLUFF DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 02/01/2018								^ belo	w) T	bel Svc. & Staff	ow)
(Street) SAN DIEGO CA 92130 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X For For	′			
		Tabl	e I - Non	-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or l	Bene	ficia	lly Own	ed		
1. Title of Security (Instr. 3)  2. Transar Date (Month/Da						ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			nd Secur Bene	ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
							v	Amount	( <i>A</i>	() or ()	Price	Trans	action(s) 3 and 4)		(Instr. 4)			
Common	Stock	L/2018	/2018		S <sup>(1)</sup>		8,219 Г		D	\$5	5 21,833		D					
		Та	ıble II - D (e								sed of, onvertib				/ Owned	I		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)    Execution Date, if any (Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	Expiration Date (Month/Day/Year)  Expiration Date (Month/Day/Year)  Se Date Expiration					7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		

## Explanation of Responses:

1. The sale of 8,219 shares of AMN Common Stock reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

## Remarks:

/s/ Ralph S. Henderson 02/02/2018

\*\* 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.