## FORM 4

## UNITED ST

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| TATES SECURITIES AND EXCHANGE COMMISSIO | N |
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|---|---|

| OMB A      | APPROVAL |
|------------|----------|
| OMB Number | 3235-028 |

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| Instruction 1(h)                       |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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|--------------------------|-----------|--|--|--|--|--|--|
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| hours per response:      | 0.5       |  |  |  |  |  |  |

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

| 1. Name and Address of Reporting Person*  Caballero Jorge A.  (Last) (First) (Middle)  2999 OLYMPUS BLVD.  SUITE 500 |  |  |   |          |  | 2. Issuer Name and Ticker or Trading Symbol     AMN HEALTHCARE SERVICES INC [     AMN ]      3. Date of Earliest Transaction (Month/Day/Year)     04/19/2024  |           |       |   |            |                    |                                     |   | Relationship of Reporting Person(s) to Issuer heck all applicable)  Director 10% Owner Officer (give title below) Other (specify below) |   |            |                                    |  |
|--|--|--|---|----------|--|---|-----------|-------|---|------------|--------------------|-------------------------------------|---|---|---|------------|------------------------------------|--|
| (Street) DALLA:  |  |  | 75019<br>(Zip)                                    |          |  | 4. If Amendment, Date of Original Filed (Month/Day/Year) 04/23/2024  6. Individual or Joint/Group Filing (Check Application) Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person |           |       |   |            |                    |                                     |   | n   |   |            |                                    |  |
| Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D                                       |  |  |   | nsaction | Execution Date, Transaction Disposed Of (D) (Instr. 3, 4 |   |           |       |   | d (A) or   | or 5. Amount of    |                                     |   | : Direct<br>Indirect  | 7. Nature of Indirect Beneficial Ownership        |            |                                    |  |
| Common Stock 04/1  |  |  |   | 19/202   | 0/2024   |   | Code M(1) | v     | Amount  | (A) or (D) | Price \$0          | Reported<br>Transact<br>(Instr. 3 a | ion(s)  |   |   | (Instr. 4) |                                    |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |          |  |   |           |       |   |            |                    |                                     |   |   |   |            |                                    |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution I<br>if any<br>(Month/Day | Date,    |  | insaction Derivative I  |           |       | Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Sec. (Instr. 3 and 4) |            |                    | f<br>g<br>Security                  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Numbe<br>derivative<br>Securities<br>Beneficia<br>Owned<br>Following<br>Reported   | e Owners s Form: Direct (I or Indire g (I) (Instr | Ownership  | Beneficial Ownership ct (Instr. 4) |  |
|  |  |  |   |          | Code   | v   | (A)       | (D)   | Date<br>Exercisa  |            | Expiration<br>Date | Title                               | Amount<br>or<br>Number<br>of<br>Shares              |   | Transaction(s<br>(Instr. 4)                       |            |                                    |  |
| Restricted<br>Stock<br>Units   | (3)  | 04/19/2024                                 |   |          | Α  |   | 3,019     |       | (4)   |            | (5)                | Common<br>Stock                     | 3,019   | \$0   | 3,019   | 9          | D                                  |  |
| Restricted<br>Stock<br>Units   | (3)  | 04/19/2024                                 |   |          | M  |   |           | 1,681 | (6)   |            | (5)                | Common<br>Stock                     | 1,681   | \$0   | 0   |            | D                                  |  |

## **Explanation of Responses:**

- 1. AMN Common Stock acquired on the vesting of Restricted Stock Units ("RSUs").
- 2. Due to an administrative error, the Form 4 filed by the reporting person on April 23, 2024 understated the amount of securities beneficially owned following the reported transaction by 2,000 shares. This Form 4 is being amended and restated to reflect that, following the reported transaction, 4,118 securities were beneficially owned by reporting person, not 2,118 as previously reported.
- 3. The RSUs were granted pursuant to the AMN Healthcare 2017 Equity Plan. Each RSU represents a contingent right to receive one share of AMN Common Stock.
- 4. The RSUs identified in this row were granted on April 19, 2024 and vest on the earlier of (i) the one year anniversary of the grant date, or (ii) the date of the Company's Annual Meeting of Shareholders in 2025
- 5. RSUs do not have an expiration date.
- 6. The RSUs identified in this row were granted on May 17, 2023 and vest on the earlier of (i) the one year anniversary of the grant date, or (ii) the date of the Company's Annual Meeting of Shareholders in 2024. Accordingly, the number of RSUs identified in this row vested on April 19, 2024.

## Remarks:

/s/ Whitney M. Laughlin, as attorney-in-fact on behalf of Jorge A. Caballero

10/15/2024

\*\* 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.