FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	9	,		

	OMB APPR	OVAL
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## Filed pursuant to Costion 16(a) of the Cognition Evolungs Act of 1024

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*     Marsh Martha H.						2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AHS								neck all app	ship of Reporting applicable) rector fficer (give title		ion(s) to Issi 10% Ov Other (s	vner
(Last) (First) (Middle) 9769 WEXFORD CIRCLE						3. Date of Earliest Transaction (Month/Day/Year) 04/22/2015								belov			below)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Street) GRANITE BAY CA 95746  (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Ta	ble I - Nor	n-Deri	ivativ	/e Se	ecuriti	es Acq	uired,	Dis	posed of	f, or Ber	neficia	ly Owne	t			
Date						action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)		d (A) or r. 3, 4 and	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	unt (A) or (D)		Transa	Transaction(s) (Instr. 3 and 4)			(111511.4)
Common Stock 04/2					22/201	/2015		M <sup>(1)</sup>		10,490 A S		\$0.0	0 3	36,673		D		
			Table II -								osed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date Execution Date, if any Control Derivative Execution Date, if any (Month/Day/Year) Execution Date is a fixed by the control of the		4. Transa Code (1 8)		Derivative		6. Date Exercisable : Expiration Date (Month/Day/Year)		te	7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		Derivativ Security	derivativ Securitie Benefici Owned Followin Reported	ve es ally eg d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amoun or Numbe of Shares		Transact (Instr. 4)		s)	
Restricted Stock Units	(2)	04/22/2015			М			10,490			(4)	Common Stock	10,49	\$0.00	0		D	
Restricted Stock Units	(2)	04/22/2015			A		5,532		(5)		(4)	Common Stock	5,532	\$0.00	5,53	32	D	

## Explanation of Responses:

- 1. Common Stock acquired on the vesting of Restricted Stock Units.
- 2. The Restricted Stock Units were granted pursuant to the AMN Healthcare Equity Plan. Each Restricted Stock Unit represents a contingent right to receive one share of Common Stock.
- 3. The Restricted Stock Units identified in this row were granted on April 23, 2014 and vest on the earlier of (i) the first anniversary of the grant date or (ii) the date of the Company's 2015 Annual Meeting of Stockholders. The Company's 2015 Annual Meeting of Stockholders was held on April 22, 2015. Accordingly, the number of Restricted Stock Units identified in this row (i.e., 10,490) vested on April 22, 2015.
- 4. Restricted Stock Units do not have an expiration date.
- 5. The Restricted Stock Units identified in this row were granted on April 22, 2015 and vest on the earlier of (i) the one year anniversary of the grant date or (ii) the date of the Company's 2016 Annual Meeting of Stockholders.

## Remarks:

/s/ Denise L. Jackson, as
Attorney-In-Fact on behalf of 04/24/2015
Martha H. Marsh

\*\* 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.

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