Common Stock

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549	
rvasinington,	D.C.	20343	

ngton, D.C. 20549	Ш	01
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(A) or (D)

A

D

A

D

Α

Price

\$0.00

\$62.11

\$0.00

\$62.42

\$0.00

Amount

2,096

842

2,077

711

7,245

Reported Transacti

Transaction(s) (Instr. 3 and 4)

48,352

47,510

49,587

48,876

56,121

	OMB APPR	OVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
1	hours nor rosponso:	0.5						

(Instr. 4)

D

D

D

D

D

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

1. Name and Address of Reporting Person* Scott Brian M.				er Name and Ticke N HEALTHC]		ymbol RVICES INC [(Check	tionship of Reportin all applicable) Director Officer (give title	ng Person(s) to Issuer 10% Owner Other (specify		
(Last) 12400 HIGH B	(First) LUFF DRIVE	(Middle)	3. Date 01/03/	of Earliest Transac /2020	ction (Month/E	Day/Year)	X	below) below			
(Street) SAN DIEGO	CA	92130	4. If An	nendment, Date of (Original Filed	(Month/Day/Year)	6. Indiv Line) X	Form filed by One	e Reporting Pers	son	
(City)	(State)	(Zip)						Person	·		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	

01/03/2020

01/03/2020

01/04/2020

01/04/2020

01/04/2020

Code

 $\mathbf{M}^{(1)}$

 $F^{(2)}$

 $M^{(1)}$

 $F^{(2)}$

 $A^{(3)}$

F⁽²⁾ 01/04/2020 2,506 D \$62.42 53,615 D 01/05/2020 $M^{(1)}$ 2,418 Α \$0.00 56,033 D F⁽²⁾ \$62.42 55,196 D 01/05/2020 837 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Num Deriva Securi Acquir or Dis of (D) 3, 4 an	tive ties ed (A) oosed Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Restricted Stock Units	(4)	01/03/2020		M			2,096	(5)	(6)	Common Stock	2,096	\$0.00	4,256	D	
Restricted Stock Units	(7)	01/04/2020		M			2,077	(8)	(6)	Common Stock	2,077	\$0.00	0	D	
Restricted Stock Units	(4)	01/05/2020		М			2,418	(9)	(6)	Common Stock	2,418	\$0.00	2,348	D	
Restricted Stock Units	(4)	01/06/2020		A		6,168		(10)	(6)	Common Stock	6,168	\$0.00	6,168	D	

Explanation of Responses:

- 1. Common Stock acquired on the vesting of Restricted Stock Units (RSUs).
- 2. Number of shares withheld for tax purposes.
- 3. The acquisition of AMN Common Stock set forth in this row resulted from the vesting of a Performance Restricted Stock Unit ("PRSU") award granted by the Company on January 4, 2017. The ultimate number of PRSUs that could have been earned and vested under this award depended on (1) the total shareholder return for the Company relative to the companies in the Russell 2000 Index as of December 31, 2016 for the 3-year period beginning on January 1, 2017 and ended December 31, 2019 ("Relative TSR") and (2) whether the Company's absolute total shareholder return for the same period was positive or negative (collectively, the "TSR Measurement"). The Compensation Committee performed the TSR Measurement for this award on January 6, 2020. The Company's Relative TSR measured in the 81st percentile and its absolute total shareholder return for the period was positive. Based on these results, the maximum amount of PRSUs for this award, were deemed earned and vested.
- 4. The RSUs identified in this row were granted pursuant to the AMN Healthcare 2017 Equity Plan. Each RSU represents a contingent right to receive one share of AMN Common Stock.
- 5. The RSUs set forth in this row were granted on January 3, 2019 and vest in three tranches on each of the first, second and third anniversaries of the grant date and the grantee's provision of three periods of credited service.
- 6. RSUs do not have an expiration date.
- 7. The RSUs identified in this row were granted pursuant to the AMN Healthcare Equity Plan. Each RSU represents a contingent right to receive one share of AMN Common Stock.
- 8. The RSUs set forth in this row were granted on January 4, 2017 and vest on the grantee's provision of three periods of credited service.
- 9. The RSUs set forth in this row were granted on January 5, 2018 and vest in three tranches on each of the first, second and third anniversaries of the grant date and the grantee's provision of three periods of
- 10. The RSUs set forth in this row were granted on January 6, 2020 and vest in three tranches on each of the first, second and third anniversaries of the grant date and the grantee's provision of three periods of

credited service.

Remarks:

/s/ Brian M. Scott

01/07/2020

** 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.