FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

Washington, D.C. 20549

wasinington,	D.O.	20040	

IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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*  Fontenot Teri G.					<u>Al</u>	2. Issuer Name and Ticker or Trading Symbol AMN HEALTHCARE SERVICES INC AMN									k all appli Directo	cable) or	g Per	10% Ov	vner
	N HEALTH	rst) HCARE SERVIC F DRIVE, SUIT				Date o		saction (Mo	nth/[	Day/Year)				Officer below)	(give title		Other (s	specify	
(Street) SAN DII	EGO C	Α !	92130 Zip)		4. If	Ame	ndment,	Date	of Original I	Filed	(Month/D	ay/Year)		. Indi ine) X	Form f	iled by One	e Repo	g (Check Ap orting Perso n One Repo	n
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,			Code (Instr. 5)						5. Amou Securitie Benefici Owned I Reporte	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Pric	е	Transac (Instr. 3	tion(s)			(111541.4)
	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. Deeme Execution if if any (Month/Day	Date, Transac Code (Ir					6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		S (I	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly O Fo oi (l)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amour or Number of Shares	r					
Restricted Stock Units	(1)	04/21/2022			A		1,458		(2)		(3)	Common Stock	1,458	3	\$0.00	1,458		D	

## **Explanation of Responses:**

- 1. 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.
- 2. The RSUs identified in this row were granted on April 21, 2022 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 2023. At the reporting owner's irrevocable election, the number of RSUs identified in this row will settle on the date of the director's separation from service with the Company.
- 3. RSUs do not have an expiration date.

## Remarks:

/s/ Denise L. Jackson, as Attorney-in-Fact on behalf of 04/22/2022 Teri G. Fontenot

\*\* 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.