SAMEK EDWARD L Form 4/A March 12, 2012

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

1(b).

Stock

(Print or Type Responses)

See Instruction

1. Name and Ad SAMEK ED	Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
	Alliance [AIQ]	Alliance HealthCare Services, Inc [AIQ]				(Check all applicable)			
(Last)	(First) (M	,	3. Date of Earliest Transaction (Month/Day/Year)				X Director Officer (give	e titleOth	Owner er (specify
100 BAYVII 400	EW CIRCLE, SU	ITE 12/31/20	011				below)	below)	
	(Street) 4. If Amend Filed(Month 01/04/201						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
NEWPORT	BEACH, CA 926		012				Form filed by Person	More than One Re	eporting
(City)	(State)	Zip) Tabl	e I - Non-D	erivative S	ecurit	ies Acq	quired, Disposed o	of, or Beneficial	lly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of		•	Securities For Beneficially (E) Owned In Following (In	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3) Executive (Month/Day/Teal) Executive any			Code		sposed		01	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)					
					(A) or		Reported Transaction(s)		
_			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	12/31/2011		A	73,846	A	\$0	187,520 <u>(1)</u>	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	nt of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
SAMEK EDWARD L 100 BAYVIEW CIRCLE SUITE 400 NEWPORT BEACH, CA 92660	X					

Signatures

Alliance HealthCare Services, Inc. with Power of Attorney 03/12/2012

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) The original Form 4 for this transaction incorrectly reported the total number of securities beneficially owned by the reporting person following the transaction.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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