FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinaton | $D \subset$ | 205/10 |
|-------------|-------------|--------|
| Washington, | D.C. | 20549 |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0362 | | | | | | | |
| Estimated average burd | en | | | | | | | |
| hours per response: | 1.0 | | | | | | | |

Form 3 Holdings Reported.

Instruction 1(b)

| Form 4 | Transactions F | Reported. | File | ed pursuant to or Sectior | | | | | rities Excha ompany Ac | | | | | | | | |
|--|---|--|---|---|---|--|--|--|---------------------------|---|--|-----------|---|--|----------------|---|--|
| 1. Name and Address of Reporting Person* ERBEY WILLIAM C | | | | | 2. Issuer Name and Ticker or Trading Symbol Altisource Portfolio Solutions S.A. [ASPS] | | | | | | | | | p of Repor blicable) ctor | Ü | () | o Issuer % Owner |
| (Last) 1661 WO SUITE 10 | | rst) (ON ROAD | Middle) | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009 | | | | | | | | Officer (give title Other (spelow) below) | | | | |
| (Street) WEST PABEACH (City) | FL | | 33409 Zip) | 4. If Amen | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | erson | | | | |
| | | Tabl | e I - Non-Deriv | ative Sec | uriti | es Ac | quir | ed, Di | sposed | of, or | Benefici | ally C | Owne | ed | | | |
| | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5) | | | or Disposed | 5. Amount of Securities Beneficially Owned at end | | es ally | 6. Ownership Form: Direct f (D) or | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Amoun | t | (A) or (D) | Price | Issuer's Year (Ins 4) | | | | ect (I) | (Instr. 4) | |
| Common | nmon Stock 08/10/2009 | | | J/K | | ζ | 5,91 | 2,738 | A | \$0 ⁽¹⁾ | 5,912,738 | | 2,738 | I | | FF Plaza Limited Partnership | |
| 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. Transaction Code (Instr. 8) | of Deriv Secu Acqu (A) o Disp of (D | vative (Mon irrities irrities osed) . r. 3, 4 (5) | | ate Exercisable and iration Date nth/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Number of Title Shares | | int er | | 9. Numbe derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy | 10. Ownersi Form: Direct (I or Indire (I) (Instr | Beneficial Ownership ct (Instr. 4) |

Explanation of Responses:

1. Stock Distribution

/s/ Teresa L. Denoncourt, 02/16/2010 Attorney-in-Fact

** 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.