Instruction 1(b)

Form 3 Holdings Reported.

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

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20070

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Form 4	Transactions R	eported.	File	ed pursuant to or Section					ities Exchai ompany Act									
Name and Address of Reporting Person* Shepro William B				2. Issuer Name and Ticker or Trading Symbol Altisource Portfolio Solutions S.A. [ASPS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) 2 RUE JE	(Fir	,	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009					Year)	X Officer (give title Other (specification) Chief Executive Officer					w)`			
(Street)	N4 (Sta		1233 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)								_ine)	Individual or Joint/Group Filing (Check Applicable te) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed (of, or	Benefici	ially	/ Owne	ed				
			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)		or Dispose	Securiti Benefic		ies O			7. Nature of Indirect Beneficial Ownership			
				(Monary Day, rear)		,		Amoui	nt	(A) or (D)	A) or D) Price		Issuer's Fiscal Year (Instr. 3 and 4)			ect (I)	(Instr. 4)	
Common Stock 08/10/2009			08/10/2009	J/K		K	24	,402	A \$0 ⁽¹⁾		24,402		,402		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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) of Dispe	erivative curities equired () or sposed (D) (D) (Str. 3, 4 d 5)				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbo of Title Shares		nt er		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	s Illy	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Stock Distribution

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

** 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.