## Edgar Filing: WILCOX KEVIN JAMES - Form 4

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April 16, 201	9										
FORM	<b>14</b>	т статес	SECUE	DITIES A	ND FY	CHA	NCF (	OMMISSION		PROVAL	
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Section 1 Form 4 or	SECURITIES					burden hours per response 0.5					
Form 5 obligation may cont <i>See</i> Instru 1(b).	inue. Section	17(a) of the	Public U		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0	·	0.0	
(Print or Type F	Responses)										
			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
	Altisource Portfolio Solutions S.A. [ASPS]					(Check all applicable)					
(N			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>04/15/2019</li></ul>					Director       10% Owner         Officer (give title below)       Other (specify below)         Chief Admin & Risk Officer			
				If Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LUXEMBO	URG, N4 L-2	163						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	med n Date, if Day/Year)		(Instr. 3,	ispose	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	04/15/2019			Code V F	Amount 3,223 (1)	(D) D	Price \$ 24.86	237,376 <u>(2)</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 information contained in this form are not 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)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Number Expiration Date of (Month/Day/Yea Derivative Securities Acquired A) or Disposed		d 7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
WILCOX KEVIN JAMES 40, AVENUE MONTEREY LUXEMBOURG, N4 L-2163			Chief Admin & Risk Officer				
Signatures							
/s/ Teresa L. Denoncourt, Attorney-in-Fact	04/16/2019						
<u>**</u> Signature of Reporting Person		E	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).

3,223 shares of the 6,833 shares of ASPS common stock received upon the vesting of 6,833 shares pursuant to the terms of Mr. Wilcox's April 15, 2015 Restricted Stock Award Agreement were foregone to pay for tax withholdings. Pursuant to the terms of

- (1) Wheokeapos, s April 15, 2015 Restricted stock Award Agreement were foregone to pay for tax withholdings. I distant to the terms of the agreement, the price per share used to determine the tax withholdings was the opening price of ASPS common stock on April 15, 2019.
- (2) Includes 1,005 time-based restricted shares of ASPS common stock, which are scheduled to vest (and will be issued) on the third anniversary of the 4/7/17 grant date (i.e., 4/7/20). Mr. Wilcox has no voting rights with respect to these shares until they vest.

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.