

Berkowitz Mortimer III  
 Form 4  
 June 19, 2018

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2015  
 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Berkowitz Mortimer III

(Last) (First) (Middle)

C/O ALPHATEC HOLDINGS, INC., 5818 EL CAMINO REAL

(Street)

CARLSBAD, CA 92008

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
 Alphatec Holdings, Inc. [ATEC]

3. Date of Earliest Transaction  
 (Month/Day/Year)  
 06/15/2018

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer (give title below)  Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	V	Amount	(A) or (D)	Price	
Common Stock	06/15/2018		J <sup>(1)</sup>		906,431	D	\$ 0 0	Held By HealthpointCapital Partners, L.P. <sup>(2)</sup>
Common Stock	06/15/2018		J <sup>(1)</sup>		1,742,546	D	\$ 0 0	Held By HealthpointCapital Partners II, L.P. <sup>(2)</sup>
Common Stock	06/15/2018		J <sup>(1)</sup>		2,807	A	\$ 0 330,725 <sup>(3)</sup>	
Common Stock	06/15/2018		J <sup>(1)</sup>		8,396	A	\$ 0 339,121 <sup>(3)</sup>	
							326,985	I



## Edgar Filing: Berkowitz Mortimer III - Form 4

the Issuer's common stock by HealthpointCapital Partners II, L.P. to its limited partners for no consideration (the "Fund II Distribution"); (c) the receipt of 2,807 shares of the Issuer's common stock by the Reporting Person in the Fund I Distribution as a limited partner of HealthpointCapital Partners, L.P.; and (d) the receipt of 8,396 shares of the Issuer's common stock by the Reporting Person in the Fund II Distribution as a limited partner of HealthpointCapital Partners II, L.P.

The Reporting Person is a managing member of HGP LLC, which is the general partner of HealthpointCapital Partners, L.P. In addition, the Reporting Person is a managing member of HGP II, LLC, which is the general partner of HealthpointCapital Partners II, L.P. As such,

- (2) the Reporting Person may be deemed to beneficially own the securities held by HealthpointCapital Partners, L.P. and HealthpointCapital Partners II, L.P. The Reporting Person, however, disclaims beneficial ownership of such shares except as to the extent of his pecuniary interest therein.
- (3) Includes shares owned by the Reporting Person and shares owned by the Reporting Person's spouse.

The Reporting Person is the managing member of Porcupine Investment Partners, LLC and may be deemed to beneficially own the securities

- (4) held by Porcupine Investment Partners, LLC. The Reporting Person, however, disclaims beneficial ownership of such shares except as to the extent of his pecuniary interest therein.

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.