Alphatec Holdings, Inc. Form 4

April 12, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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Check this box

if no longer

subject to

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * HealthpointCapital Partners LP

2. Issuer Name and Ticker or Trading Symbol

Alphatec Holdings, Inc. [ATEC]

5. Relationship of Reporting Person(s) to

Issuer

(Last) (First)

(Middle)

(Check all applicable)

C/O HEALTHPOINT

3. Date of Earliest Transaction

(Month/Day/Year) 03/26/2010

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

CAPITAL, 505 PARK AVE., 12TH **FLOOR**

(State)

(Zip)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

6.

Ownership

Direct (D)

Form:

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

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

NEW YORK, NY 10022

(City)

1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired (A) 5. Amount of Security (Month/Day/Year) Execution Date, if Transactionr Disposed of (D) Securities (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially (Month/Day/Year) (Instr. 8) Owned Following Reported (A)

or Indirect (I) Transaction(s) (Instr. 3 and 4)

(Instr. 4)

Ι

or Price Code V Amount (D)

See Footnote

7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

Common 03/26/2010 Stock

(1) A 6,732,534 20,077,173 Α

(2)

(9-02)

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

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

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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	:		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Troporting of the Francisco	Director	10% Owner	Officer	Other			
HealthpointCapital Partners LP C/O HEALTHPOINT CAPITAL 505 PARK AVE., 12TH FLOOR NEW YORK, NY 10022	X	X					
Cianaturas							

Signatures

/s/ Ebun S. Garner, ESQ., attorney-in-fact

04/12/2010

Date

**Signature of Reporting Person

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).
- The Reporting Person acquired the shares in connection with the Issuer's acquisition of Scient'x S.A. The Reporting Person received the shares in exchange for 3,953,664 shares of common stock of Scient'x S.A. On the closing of the acquisition, the closing price of the Issuer's common stock was \$6.39 per share.
- Mortimer Berkowitz III and John H. Foster, who are directors of the Issuer, are each a managing member and beneficial owner of HGP, (2) LLC, which is the general partner of the Reporting Person. Messrs. Berkowitz and Foster are representatives of the Reporting Person on the Issuer's board of directors and the Reporting Person is a "director by deputization."

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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