SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <sup>*</sup> <u>Erbey Elsie Elaine</u>	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 07/21/2022 3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Altisource Asset Management Corp</u> [ AAMC ]					
(Last) (First) (Middle) P.O. BOX AP-59223, PMB 3406 (Street) NASSAU C5	-	- <b>-</b> -	4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below)	( 10% C	Swner 6 (specify	. Individual or Jo Check Applicable X Form filed Person	int/Group Filing e Line) by One Reporting by More than One
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock			805,749	D			
Table II - Derivative Securities Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Securit Underlying Derivative Security (Instr. 4)		4. Conversio or Exercise	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

## /s/ Elsie Elaine Erbey

Person

\*\* Signature of Reporting Date

07/29/2022

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 5 (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.