REARDON WILLIAM S Form 3 June 18, 2010 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549

INITIAL STATEMENT OF 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)

Person *

(Last)

(City)

(Instr. 4)

1. Title of Security

1. Name and Address of Reporting Statement H&O HEALTHCARE INVESTORS [HOH] REARDON WILLIAM S (Month/Day/Year) 06/08/2010 (First) (Middle) 4. Relationship of Reporting

HAMBRECHT & QUIST CAPITAL MANAGEMENT LLC, 2 LIBERTY SQUARE, 9TH FLOOR

(Street)

(State)

BOSTON, MAÂ 02109

(Zip)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

10% Owner Other (give title below) (specify below) 6. Individual or Joint/Group

Ownership

(Instr. 5)

Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person

4. Nature of Indirect Beneficial

Table I - Non-Derivative Securities Beneficially Owned

Ownership

Direct (D) or Indirect (I) (Instr. 5)

Form:

3.

2. Amount of Securities Beneficially Owned (Instr. 4)

SEC 1473 (7-02)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Person(s) to Issuer

X Director

Officer

(Check all applicable)

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

OMB APPROVAL

OMB 3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Report	Reporting Owner Name / Address		Relationships			
Reporting of the Funct / Function		Director	10% Owner	Officer	Other	
REARDON WILLIAM S HAMBRECHT & QUIST CAPITAL MANAGEMENT LLC 2 LIBERTY SQUARE, 9TH FLOOR BOSTON, MA 02109		ÂX	Â	Â	Â	
Signatures						
/s/ Laura Woodward	06/18/2010					
** Signature of Reporting Person	Date					

Explanation of Responses:

No securities are beneficially owned

- * 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. 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.