HealthMarkets, Inc. Form 3 June 10, 2008

# FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

January 31, 2005

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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 \*

 HILDEBRAND PHILLIP **JOHN** 

(Last)

(First)

(Middle)

(Zip)

Statement

(Month/Day/Year) 06/05/2008

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

HealthMarkets, Inc. [N/A]

**9151 BOULEVARD 26** 

(Street)

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

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

Chief Executive Officer

(Check all applicable)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person

Form filed by More than One

Reporting Person

#### NORTH RICHLAND HILLS. TXÂ 76180

(City) (State)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership

(I) (Instr. 5)

Form: Direct (D) or Indirect 4. Nature of Indirect Beneficial

Ownership (Instr. 5)

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise Price of

Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date

Exercisable

**Expiration Title** Date

Amount or Number of Shares

Security: Derivative Security Direct (D) or Indirect (I)

1

(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

HILDEBRAND PHILLIP JOHN

9151 BOULEVARD 26 Â X Â Ĉhief Executive Officer Â

NORTH RICHLAND HILLS, TXÂ 76180

### **Signatures**

Phillip J. Hildebrand By /s/ Peggy G. Simpson, POA 06/10/2008

\*\*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.

Reporting Owners 2