## Edgar Filing: HILDEBRAND PHILLIP JOHN - Form 4

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HILDEBRAND PHILLIP JOH Form 4 June 08, 2010	N								
								PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287	
Check this box if no longer						Expires:	January 31,		
if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated a burden hou	irs per		
Form 4 or Form 5 Eiled pursu	ant to Section 1	G(a) of the	Saamiti	a Er	ahana	ha h at af 1024	response	0.5	
abligations Theu pursu	ant to Section 10 of the Public Ut				•		n		
<i>See</i> Instruction 1(b).	30(h) of the In	•	•				11		
(Print or Type Responses)									
1. Name and Address of Reporting Pe HILDEBRAND PHILLIP JOH	lssuer Name <b>and</b> Ticker or Trading bol				5. Relationship of Reporting Person(s) to Issuer				
HealthMarkets, Inc. [N/A]						(Chec	k all applicable	all applicable)	
(Last) (First) (Mid	idle) 3. Date of	3. Date of Earliest Transaction				(Chee	k an applicable	-)	
	onth/Day/Year)			_X_ Director 10% Owner					
9151 BOULEVARD 26	/2010				X Officer (give title Other (specify below) below) Chief Executive Officer				
(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NORTH RICHLAND HILLS, TX 76180						Form filed by M Form filed by M Person			
(City) (State) (Z	<sup>ip)</sup> Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned	
		3. Transactio Code (Instr. 8)		sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Class A-1		Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common 06/04/2010 Stock		F	18,041	D	\$7	605,097	D		

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 Acquired, Disposed of, or Beneficially Owned

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
i g	Director	10% Owner	Officer	Other				
HILDEBRAND PHILLIP JOHN 9151 BOULEVARD 26 NORTH RICHLAND HILLS, TX 76180	Х		Chief Executive Officer					
Signatures								
Phillip J. Hildebrand By: /s/ Peggy G. Sim POA	npson,	06/0	07/2010					
<u>**</u> Signature of Reporting Person		I	Date					
<b>Explanation of Respons</b>	ses:							

\* 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).

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.