

APOLLO ADVISORS IV LP  
 Form 3  
 April 10, 2009

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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

**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)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â APOLLO MANAGEMENT V LP			(Month/Day/Year)	HUGHES Telematics, Inc. [HTC]	
(Last)	(First)	(Middle)		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
9 WEST 57TH STREET				(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
(Street)				<input type="checkbox"/> Director	<input checked="" type="checkbox"/> 10% Owner
NEW YORK,Â NYÂ 10019				<input type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)		(give title below)	(specify below)
					<input type="checkbox"/> Form filed by One Reporting Person
					<input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	60,447,284	I	See footnote <u>(1)</u>

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

SEC 1473 (7-02)

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

Edgar Filing: APOLLO ADVISORS IV LP - Form 3

Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
---------------------	--------------------	----------------------------------	----------------------------------

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
APOLLO MANAGEMENT V LP 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Capital Management V, Inc. 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
APOLLO ADVISORS IV LP 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Management GP, LLC 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Management, L.P. 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
APOLLO ADVISORS V LP 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Principal Holdings I, L.P. 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Management Holdings, L.P. 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Management Holdings GP, LLC 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^
Apollo Principal Holdings I GP, LLC 9 WEST 57TH STREET NEW YORK, NY 10019	^	^ X	^	^

## Signatures

See signatures attached as  
Exhibit 99.2

04/10/2009

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) See Exhibit 99.1

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.