Sports Properties Acquisition Corp. Form 3 May 05, 2008 FORM 3 UNITED STAT

3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION 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)

A KREITMAN STANLEY				2. Date of Eve Statement		3. Issuer Name and Ticker or Trading Symbol Sports Properties Acquisition Corp. [HMR]				
	(Last)	(First)	(Middle)	(Month/Day/ 05/01/2008		4. Relationshi Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)	
		ON AVEN ^(Street) K, NYÂ				(Check X_ Director Officer (give title below	Other	Owner	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 	
	(City)	(State)	(Zip)		Table I - N	lon-Derivat	ive Securiti	es Be	neficially Owned	
	itle of Secu tr. 4)	rity			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1	
Co	mmon St	ock, par va	llue \$.001 j	per share	0		D	Â		
	-	ort on a separ or indirectly.		ach class of secu	urities benefici	ially S	EC 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.										
	Т	able II - De	rivative Secu	irities Beneficia	lly Owned (e.	g., puts, calls,	warrants, opt	tions, c	onvertible 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	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB APPROVAL

Estimated average burden hours per

3235-0104

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KREITMAN STANLEY 437 MADISON AVENUE NEW YORK, NY 10022	X	Â	Â	Â			
Signatures							
/s/ STANLEY KREITMAN	05/05/20)08					
**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).

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.