Edgar Filing: APTARGROUP INC - Form 4

APTARGRO	OUP INC											
Form 4												
May 04, 200)5											
FORM	ΛΔ								OMB AF	PROVAL		
	UNITE	D STATE		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check th									Expires:	January 31,		
if no longer subject to STATEMENT OF Cl				HANGES IN BENEFICIAL OWNE				NERSHIP OF		2005 average		
Section	Section 16. SECURITIES							Estimated average burden hours per				
Form 4 o Form 5			~ · ·		~ .				response	0.5		
obligatic							•	e Act of 1934,				
may con				•	•	· ·		1935 or Section	1			
See Instr	ruction	30(n)) of the fr	vestment	Compan	y Aci	. 01 194	0				
1(b).												
(Print or Type	Responses)											
	*											
1. Name and A	Address of Report	ing Person [*]	2. Issue	r Name and	I Ticker or	Tradin	ing 5. Relationship of Reporting Person(s) to					
FOURMENT OLIVIER Symbo				-				Issuer				
			APTAF	APTARGROUP INC [ATR]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date o	f Earliest Tı	ransaction			(Check	k an applicable)		
			(Month/I	Day/Year)				Director	10%	Owner		
475 WEST	TERRA COT	ΓΑ AVE.,	05/03/2	005				X Officer (give below)	title Othe below)	r (specify		
SUITE E								· · · · · · · · · · · · · · · · · · ·	cteur General			
	(Street)		4 If Ame	endment Da	ate Origina			6 Individual or Io	int/Group Filin	o(Check		
				Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
					/			_X_ Form filed by O	1 0			
CRYSTAL	LAKE, IL 600)14						Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Securi	ties Acqu	uired, Disposed of	, or Beneficial	y Owned		
1.Title of	2. Transaction I	Date 2A Dee	med	3.	4. Securit	ies Ac	auired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Ye	on Date, if					Securities	Ownership	Indirect			
(Instr. 3)		Code (Instr. 3, 4 and 5)				5)	Beneficially	Form: Direct				
		(Month/	Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
								Reported	(Instr. 4)	(111501. 4)		
						(A) or		Transaction(s)	,			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/03/2005			М	17,000	A	\$	17,126	D			

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

Stock

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.

28.06

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

Reporting Owners

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of ionDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 28.06	05/03/2005		М	1	17,000	01/22/2002	01/22/2011	Common Stock	17,000
D										

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FOURMENT OLIVIER 475 WEST TERRA COTTA AVE., SUITE E CRYSTAL LAKE, IL 60014			Directeur General				
Signatures							
Olivier Fourment by Ralph Poltermann as attorney-in-fact		05/04/200	5				
**Signature of Reporting Person		Date					
Evaluation of Decrements.							

Explanation of Responses:

* 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.