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Form 4	rises, Inc.											
August 17, 2												
FORM	14 UNITED S	STATES	SECUR	TIES A	ND EXC	CHAN	NGE C	COMMISSION		PPROVAL		
Check th	hington,					Number:	3235-0287					
if no lon	ger STATEN	IFNT O	F CHAN	CES IN I	RENEEL	СТАТ	NEBSHID OF	Expires:	January 31, 2005			
STATEMENT OF CHANGES IN BENEFIC Section 16. SECURITIES						CIAI			Estimated a burden hou	•		
Form 4 c Form 5	Form 4 or							response	•			
obligatio	ns Section 17(U	e Act of 1934, 1935 or Sectio	n			
may con <i>See</i> Instr	unue.			vestment	•	- ·						
1(b).												
(Print or Type	Responses)											
	Address of Reporting	Person [*]		Name and	Ticker or T	Fradin	g	5. Relationship of Issuer	Reporting Pers	son(s) to		
PODZIMEK CHERI B			Symbol APA Enterprises, Inc. [APAT]									
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
5480 NATHAN LANE			(Month/Day/Year) 08/16/2007					Director 10% Owner X Officer (give title Other (specify				
								below)				
	4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
			Filed(Mon	th/Day/Year)	I			Applicable Line) _X_ Form filed by 0	One Reporting Pe	erson		
PLYMOUT	TH, MN 55442							Form filed by N	Aore than One Re	porting		
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acq		f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	e 2A. Dee	med	3.	4. Securit	ies Ac	quired	Person uired, Disposed of 5. Amount of	6. Ownership	7. Nature of		
	~ /	e 2A. Dee Executio any	med on Date, if	3. Transactio Code	4. Securit m(A) or Dis (Instr. 3, 4	ies Ac sposed	quired of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial		
1.Title of Security	2. Transaction Date	e 2A. Dee Executio any	med on Date, if	3. Transactio	4. Securit m(A) or Dis (Instr. 3, 4	ies Ac sposed	quired of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct	7. Nature of Indirect Beneficial		
1.Title of Security	2. Transaction Date	e 2A. Dee Executio any	med on Date, if	3. Transactio Code	4. Securit m(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5 (A)	quired of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
1.Title of Security	2. Transaction Date	e 2A. Dee Executio any	med on Date, if	3. Transactio Code	4. Securit m(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5	quired of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3)	2. Transaction Date	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8)	4. Securit n(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5 (A) or	quired of (D) 5) Price \$	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3) Common Stock	2. Transaction Date (Month/Day/Year)	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit n(A) or Dis (Instr. 3, 4) Amount	ies Ac sposed 4 and 5 (A) or (D)	quired of (D) 5) Price \$ 0.75	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit n(A) or Dis (Instr. 3, 4) Amount	ies Ac sposed 4 and 5 (A) or (D)	quired of (D) 5) Price \$	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3) Common Stock Common	2. Transaction Date (Month/Day/Year) 08/16/2007 08/16/2007	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V P P	4. Securit n(A) or Dis (Instr. 3, 4 Amount 100 100	ies Ac sposed 4 and 5 (A) or (D) A A	quired of (D) 5) Price \$ 0.75 \$ 0.76 \$	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 100 200	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3) Common Stock Common Stock	2. Transaction Date (Month/Day/Year) 08/16/2007	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V P	4. Securit n(A) or Dis (Instr. 3, 4 Amount 100	(A) (A) (C) (C) (C) (C)	quired of (D) 5) Price \$ 0.75	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 100	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3) Common Stock Common Stock Common Stock Common	2. Transaction Date (Month/Day/Year) 08/16/2007 08/16/2007	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V P P	4. Securit n(A) or Dis (Instr. 3, 4 Amount 100 100	ies Ac sposed 4 and 5 (A) or (D) A A	quired of (D) 5) Price \$ 0.75 \$ 0.76 \$ 0.78 \$	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 100 200	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	7. Nature of Indirect Beneficial Ownership		
1.Title of Security (Instr. 3) Common Stock Common Stock Common Stock	2. Transaction Date (Month/Day/Year) 08/16/2007 08/16/2007 08/16/2007	e 2A. Dee Executio any	med on Date, if	3. Transactio Code (Instr. 8) Code V P P P	4. Securit n(A) or Dis (Instr. 3, 4) Amount 100 100	ies Ac sposed 4 and 5 (A) or (D) A A A A	quired of (D) 5) Price \$ 0.75 \$ 0.76 \$	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 100 200 300	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D D	7. Nature of Indirect Beneficial Ownership		

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Common Stock	08/16/2007	Р	10,000	А	\$ 0.88	16,775	D
Common Stock	08/16/2007	Р	1,100	А	\$ 0.9	17,875	D
Common Stock	08/16/2007	Р	1,874	А	\$ 0.92	19,749	D
Common Stock	08/16/2007	Р	251	А	\$ 0.94	20,000	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. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships							
	Director	10% Owner	Officer	Other					
PODZIMEK CHERI B 5480 NATHAN LANE PLYMOUTH, MN 55442			CEO						
Signatures									
Cheri B. Podzimek	08/17/2007								
<u>**</u> Signature of	Date								

Reporting Person

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.