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APARTMEN	T INVESTMENT	Г & MANAGEM	IENT CO							
Form 4										
February 17,	2005									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							- -	OMB APPROVAL		
	- UNITED S					NGE		OMB Number:	3235-0287	
Check this box				hington, D.C. 20549					January 31,	
if no long subject to Section 10 Form 4 or	HANGES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: 2005 Estimated average burden hours per response 0.5					
Form 5 obligations may continue. See Instruction 1(b). 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 R	esponses)									
1. Name and Ad ELLWOOD	er Name and Ticker or Trading TMENT INVESTMENT & AGEMENT CO [AIV]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Month			Date of Earliest Transaction onth/Day/Year) /15/2005				X_ Director 10% Owner Officer (give title Other (specify below) below)			
			f Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip) Tabl	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l of (D 4 and (A) or) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Class A Common Stock	02/15/2005		A		A	<u>(1)</u>	19,825 <u>(2)</u>	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 Own 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 / Addr	Relationships ss							
	Director	10% Owner	Officer	Other				
ELLWOOD RICHARD S P.O. BOX 530 RUMSON, NJ 07760	Х							
Signatures								
Richard S. Ellwood	02/17/2005							
<u>**</u> Signature of	Date							

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).
- (1) Award for director compensation; price column not applicable.

In addition to these 19,825 shares held directly by the reporting person, the reporting person holds indirectly 7,700 shares. Of those 7,700 shares held indirectly by the reporting person, 7,500 are held in an IRA belonging to the reporting person and 200 shares are held by a

(2) shares ned indirectly by the reporting person, 7,500 are ned in an INA belonging to the reporting person and 200 shares are ned by a charitable trust for which shares the reporting person disclaims beneficial ownership. In addition, the reporting person's wife holds 1,000 shares, for which shares the reporting person disclaims beneficial ownership.

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.

Reporting Person