Edgar Filing: HANDLEMAN CO /MI/ - Form 4

HANDLEMA	AN CO /MI/									
Form 4										
September 09	, 2005									
Check this box Check this box Check this box							OMB			
							urs per			
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> Wilson Thomas Scott			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			HANDLEMAN CO /MI/ [HDL]				(Check all applicable)			
(Last) (First) (Middle) 500 KIRTS BOULEVARD			3. Date of Earliest Transaction (Month/Day/Year) X_ 09/07/2005					give title 10% Owner Other (specify below)		
Filed(Mo			Amendment, Da d(Month/Day/Year	mendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
TROY, MI 4	8084						Person		· · · · · · · · · · · · · · · · · · ·	
(City)	(State) (Zip)	Table I - Non-D	Perivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	TransactionAcquired (A) or		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common stock one cent par value	09/07/2005		Code V A	Amount 2,000	or (D)	Price (<u>1)</u>	Transaction(s) (Instr. 3 and 4) 4,500	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)

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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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh		
r o	Director	10% Owner	Officer	Other
Wilson Thomas Scott 500 KIRTS BOULEVARD TROY, MI 48084	Х			
Signatures				
Thomas Scott Wilson by Kenn Attorney-In-Fact	eth P. Ka	rtje		09/09/2005

**Signature of Reporting Person

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) Not applicable.

Remarks:

Exhibit List ----- Exhibit 24 Power of Attorney

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.