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Form 4	ENTERPRISES IN	١C							
June 05, 20 FORM	VI 4 this box nger to 16. or Filed pu Section 17	MENT OF CH rsuant to Secti (a) of the Publ	Washington IANGES IN SECU on 16(a) of t	n, D.C. 2 N BENE RITIES the Secu olding C	20549 FICI S rities ompa	Act of 1934, 1935 or Sectio	OMB Number: Expires: Estimated burden ho response.	ours per	
(Print or Type	e Responses)								
1. Name and PORTER	Address of Reporting JAMES S	Sym	Issuer Name a bol OGEE ENT ' OG]			8	5. Relationship of Issuer (Chec	Reporting Pe	
	(First) (XES AVENUE SUITE 1800	(Mo	ate of Earliest nth/Day/Year) 05/2008		on		Director X_Officer (give below) Chief		
	(Street)	File	Amendment, I d(Month/Day/Ye	-	nal		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M	One Reporting	Person
MINNEAI	POLIS, MN 5543	1-1159					Person	tore than One	Keponing
(City)	(State)	(Zip)	Table I - Non	-Derivati	ve Sec	urities Acqu	iired, Disposed of	f, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code ar) (Instr. 8)		(A) or		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 (Instr. 4)
Common Stock					. ,		73,277 <u>(1)</u>	D	
Common Stock							200	Ι	By Daughter
Common Stock							150	Ι	By Son
Common Stock							1,367 <u>(2)</u>	Ι	401(k) Plan
Common Stock	06/05/2008		A <u>(3)</u>	35	А	\$ 25.9542	12,520	I	Partnership Plan Trust

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Da	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	•	Title Number			
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Ad	dress	Relationships						
	Director	10% Owner	Officer	Other				
PORTER JAMES S 7900 XERXES AVENUE S SUITE 1800 MINNEAPOLIS, MN 5543			Chief Financial Officer					
Signatures								
/s/ James S.	06/05/2008							

Porter

**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) Includes shares acquired under the ESPP as of 3/31/08, shares of restricted stock granted under the Partnership Plan, performance shares and shares distributed from the Partnership Plan that are now directly owned.

Represents the approximate number of shares of common stock for which the Reporting Person has the right to direct the vote under the Apogee 401(k) Retirement Plan per the Trustee's 3/31/08 statement. Shares of common stock are not directly allocated to the Plan

- (2) Apoget 401(k) Remember that per the Hustee's 5/5/108 statement. Shares of common stock are not uncerty anotated to the Has participants, but are instead held in a unitized fund consisting primarily of common stock and a small percentage of short-term investments. Participants acquire units in this fund.
- (3) Shares acquired pursuant to a dividend reinvestment feature of the Partnership Plan.

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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.