SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

1. Name and Address of Reporting Person*

7900 XERXES AVENUE SOUTH

(First)

(

(Zip)

PORTER JAMES S

(Last)

(City)

SUITE 1800

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burg	den					
hours ner resnonse.	05					

Form filed by One Reporting Person

Form filed by More than One Reporting

Filed	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940		<u> [</u>	
Middle)	 2. Issuer Name and Ticker or Trading Symbol <u>APOGEE ENTERPRISES INC</u> [APOG] 3. Date of Earliest Transaction (Month/Day/Year) 11/13/2008 		ationship of Reporting Per x all applicable) Director Officer (give title below) Chief Financia	10% Owner Other (specify below)
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	/idual or Joint/Group Filir	ng (Check Applicable

Line) Х

Person

(Street)	
MINNEAPOLIS MN	55431-1159

(State)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)				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)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock								73,291(1)	D	
Common Stock								200	I	By Daughter
Common Stock								150	Ι	By Son
Common Stock								1,379 ⁽²⁾	Ι	401(k) Plan
Common Stock	11/13/2008		A ⁽³⁾		128	A	\$ 7.9971	12,701	Ι	Partnership Plan Trust

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

			(0.9.) P	uto, 0	uno,	wan	unto,	options,			Janacoj				
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. Transa Code (8)		of Deriv Secu Acqu (A) or Dispo of (D)	erivative courities cquired) or sposed (D) str. 3, 4		Month/Day/Year) Securities Underlying Derivative		Amount of becurity Security Security Security Security Security Security Security (Instr. 5) Be Security (Instr. 3 and 4) For Security Sec		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Includes shares acquired under the ESPP as of 9/30/08, shares of restricted stock granted under the Partnership Plan, restricted stock awards under the Omnibus Stock Incentive Plan, performance shares and shares distributed from the Partnership Plan that are now directly owned.

2. 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 9/30/08 statement. Shares of common stock are not directly allocated to the Plan 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.

/s/ Patri	cia A. Beithon,
Attorne	y-in-fact for James S
D	

11/14/2008

Date

Porter ** Signature of Reporting Person

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

* 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.

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 Number.