FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* PORTER JAMES S					2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES INC [APOG]									5. Relationship of Report (Check all applicable) Director			10%	Owner		
(Last) 7900 XE SUITE 18		rst) (NUE SOUTH	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/28/2009									X Officer (give title Other (specify below) Chief Financial Officer					
(Street) MINNEAPOLIS MN 55431-1159				. 4. If	Line)										Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip)																	
Table I - Non-Derive 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)			tion	ion 2A. Deemed Execution Date,			3. 4. Securities		es Acquired (A) or Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form:	Direct Indirect I	7. Nature of ndirect Beneficial Ownership (Instr. 4)				
									Code	V	Amount	(A) o (D)	' Pri	ce	(Instr. 3	and 4)	_	_		
Common	Stock					-							+		81,9.	28(1)(2)		D	D.,,	
Common Stock														200				By Daughter		
Common Stock															150		I		By Son	
Common Stock														1,407(3)		I		401(k) Plan		
Common Stock 02/			02/28/	2009				F		4,000	D	\$	9.47	0(2)		I		Partnership Plan Trust		
		Та	ble II -								osed of, convertib				Owned					
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instr	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		. 3	8. Price of Derivative Security (Instr. 5) Securities Beneficia Owned Followin Reportec Transact (Instr. 4)		Ownership Form: Direct (D) or Indirect g (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V (A) (D)		Date Exercis	able	Expiration Date	of Title Shares										

Explanation of Responses:

- 1. Includes shares acquired under the ESPP as of 12/31/08, 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. This filling reflects the change of 8,801 shares from indirect ownership to direct ownership in connection with a distribution of such shares from the Partnership Plan Trust. This is the final distribution of Pool A Shares from the Partnership Plan Trust.
- 3. 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 12/31/08 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.

/s/ Patricia A. Beithon,

Attorney-in-Fact for James S. 03/03/2009

Porter

** Signature of Reporting Person

Date

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.