FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>Hays Sara L</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES INC [APOG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|---|--|---|------------------|--|--|-------|--------------|--|----------------|---------------------|---|---|---|---|-------------------------------------|--|---------------------------------------|--|
| (Last) (First) (Middle) WRIGHTWOOD CAPITAL | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2006 | | | | | | | | Officer below) | (give title | | Other (specification) | pecify | |
| TWO NORTH LASALLE STREET, EIGHTH FLOOR | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) CHICAGO IL 60602 | | | 60602 | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) |) (State) (Zip) | | | | | | | | | | | | | | | | | | |
| | | Tal | ble I - Non-D | erivati | ve Se | curit | ies A | cqu | uired, D | ispos | sed of | , or Ben | eficiall | y Owned | | | | | |
| Date | | | Transaction te onth/Day/ | Year) | 2A. Deemed Execution Date if any (Month/Day/Yea | | | Code (Instr. | | | | | 5. Amoun Securities Beneficia Owned Fo | s Form ally (D) of ollowing (I) (I | | Direct II Indirect E tr. 4) C | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code V | / Ar | nount | (A) or (D) | Price | Reported Transacti (Instr. 3 a | ction(s) | | | (Instr. 4) | |
| 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) | 3A. Deemed Execution Date, if any (Month/Day/Yea | Code | action (Instr. | of E | | Expi | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exe | e rcisable | Expira Date | ation | Title | Amount or Number of Shares | | | | | | |
| Phantom Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | 06/30/2006 | | A | | 823 | | 08/0 | 8/1988 ⁽¹⁾ | 08/08/ | 1988 ⁽¹⁾ | Common Stock | 823 | \$14.7 | 1,727 | | D | | |
| Phantom Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | 06/30/2006 | | A ⁽³⁾ | | 4 | | 08/0 | 8/1988 ⁽¹⁾ | 08/08/ | 1988 ⁽¹⁾ | Common Stock | 4 | \$14.7 | 1,731 | | D | | |

Explanation of Responses:

- 1. The phantom stock units were allocated under the Deferred Compensation Plan for Non-Employee Directors. The units of phantom stock will be settled in shares of common stock following the director's termination from the Board or death, or following the occurrence of other events specified in the Plan.
- 2. Settled 1-for-1
- 3. Units acquired pursuant to a dividend equivalent reinvestment feature of the Deferred Compensation Plan for Non-Employee Directors.

/s/ Sandra J. Parker, Attorneyin-Fact for Sara L. Hays 07/05/2006

** 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.