FORM 4

obligations may continue. See Instruction 1(b).

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 | STATEMENT OF CHAI |
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| Section 16. Form 4 or Form 5 | |

NGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* <u>Reynolds Richard VanFleet</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES INC [APOG] | | | | | | | | 5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own | | | |
|--|--|--|---|------------------------------|---|---|-----------------|--|------|------------------|---|--|--|--|---|---------------------------------------|
| (Last) 1629 AP | Last) (First) (Middle) 629 APPLEWOOD DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2008 | | | | | | | Office below | r (give title) | Other below | (specify |
| (Street) BEAVERCREEK OH 45434 (City) (State) (Zip) | | | | 4. I | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execution Date | | | Code (Instr. 5) | | | str. 3, 4 ar | Benefic Owned Reporte | ies F cially (I Following (I | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | (A) C | Price | Transac (Instr. 3 | | | |
| 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 | Date Execution (Month/Day/Year) if any | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | | | 6. Date Exercisable 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 derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amount or Number of Shares | | | | |
| Phantom Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | 06/30/2008 | | A | | 969 | | 08/08/1988 | 3 08 | 3/08/1988 | Common Stock | 969 | \$16.16 | 5,164 | D | |
| Phantom Stock | \$0 ⁽²⁾ | 06/30/2008 | | A ⁽³⁾ | | 19 | | 08/08/1988 | 3 08 | 3/08/1988 | Common Stock | 19 | \$16.16 | 5,183 | 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/ Patricia A. Beithon,

Attorney-in-Fact for Richard V. 07/01/2008

Reynolds

** 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.