## Edgar Filing: APOGEE ENTERPRISES INC - Form 4

APOGEE I Form 4	ENTERPRISES IN	NC										
May 19, 20	05											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									r	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check if no lo		Wushington, D.C. 2004)						Expires:	January 31			
subject Section Form 4	to STATE 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.		
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> CLAUER MICHAEL B			2. Issuer Name <b>and</b> Ticker or Trading Symbol APOGEE ENTERPRISES INC				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		[APOG]										
(Last) (First) (Middle) 7900 XERXES AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 05/19/2005					Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President				
	SUITE 1800	Executiv						ive vice Presi	dent			
				. If Amendment, Date Original ?iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MINNEA	POLIS, MN 5543	1-1159						Form filed by M Person	More than One l	Reporting		
(City)	(State)	(Zip)	Ta	ble I - Non-	-Derivativ	e Sec	urities Acq	uired, Disposed o	f, or Benefici	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if Transaction		oror Dispo	4. Securities Acquired (A) nor Disposed of (D) (Instr. 3, 4 and 5) (A) or		Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount		Price	(Instr. 3 and 4) 68,253 (1)	D			
Stock												
Common Stock	05/19/2005			A <u>(2)</u>	193	A	\$ 13.3332	41,409	Ι	Partnership Trust		

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.

## Edgar Filing: APOGEE ENTERPRISES INC - Form 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
CLAUER MICHAEL B 7900 XERXES AVENUE SOUTH SUITE 1800 MINNEAPOLIS, MN 55431-1159			Executive Vice President					
Signatures								
/s/ Patricia A. Beithon, Attorney-in-Fa Clauer	ct for Micha	el B.	05/19/2005					
<u>**</u> Signature of Reporting Pers	on		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 2/28/05, shares of restricted stock granted under the Partnership Plan, performance shares and shares distributed from the Partnership Plan that are now directly owned.
- (2) Shares acquired pursuant to a dividend reinvestment feature of the Partnership Plan.

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.