## Edgar Filing: JOHNSON GARY ROBERT - Form 4

Form 4	GARY ROBERT										
March 06, 2	007										
FORM		статес	SECIO	DITIES A		СЦ	NCE	COMMISSIO		APPROVAL	
Check th	UNITED	SIAILS		shington			INGE (	20101101155101	N OMB Number:	3235-0287	
if no lon	aor								Expires:	January 31, 2005	
subject to Section Form 4 c	1ENT OI	F CHAN	NGES IN SECUF		<b>FICI</b> A	AL OW	NERSHIP OF	Estimated burden he response	d average ours per		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(	a) of the 1	Public U		ding Co	mpan	iy Act o	ge Act of 1934, f 1935 or Section 40			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u></u> JOHNSON GARY ROBERT			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
			APOGEE ENTERPRISES INC [APOG]					(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner XOfficer (give title Other (specify below) below)			
7900 XERX SOUTH, SU	KES AVENUE UITE 1800		03/03/2	2007					rer & Vice Pre	esident	
Filed(Mont				endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
MINNEAP	OLIS, MN 55431	-1159						Person	More than One	Reporting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	e Secu	rities Aco	quired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock								28,183 <u>(1)</u> <u>(2)</u>	D		
Common Stock								1,978 <u>(3)</u>	I	401(k) Plan	
Common Stock								500	I	IRA	
Common Stock	03/03/2007			F	690	D	\$ 19.71	7,757 <u>(2)</u>	I	Partnership Plan Trust	

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own 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						
	Director	10% Owner	Officer	Other			
JOHNSON GARY ROBERT 7900 XERXES AVENUE SOUTH SUITE 1800 MINNEAPOLIS, MN 55431-1159			Treasurer & Vice President				
Signatures							

/s/ Gary Robert Johnson	03/06/2007			
**Signature of Reporting	Date			

Person

# **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).
- Includes shares acquired under the ESPP as of 12/31/06, shares of restricted stock granted under the Partnership Plan, performance shares (1) and shares distributed from the Partnership Plan that are now directly owned.
- This filing reflects the change of 1,517 shares from indirect ownership to direct ownership in connection with a distribution of such shares (2)from the Partnership Plan Trust.
- (3) Shares acquired under the 401(k) retirement plan as of 12/31/06.

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.