SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISS	ION

Washington, D.C. 20549

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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1. Name and Address of Reporting Person* HORNER J PATRICK				2. Issuer Name and Ticker or Trading Symbol <u>APOGEE ENTERPRISES INC</u> [APOG]							(Che	lationship o ck all applic	able)	g Perso	()			
												X	Directo	ſ		10% O\	vner	
(Last) 7414 DU	(Fi JLANY DR	irst) IVE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2004								Officer below)			Other (s below)	specify	
					4. If Ame	endment. Date	e of C	Driginal I	Filed (Month/Dav	(Year)	6. Inc	6. Individual or Joint/Group Filing (Check Applicable					
(Stroot)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)			5	(F1			
MCLEA	(Street) MCLEAN VA 22101-2715											Form fi	led by One	e Repor	rting Perso	n		
	1 1	n	22101-2/1										Form filed by More than One Reporti Person			ing		
(City)	(S	tate)	(Zip)										1 010011					
		Ta	ble I - Non	-Deriva	ative Se	ecurities A	Acqu	uired,	Disp	osed of	, or Bene	eficially	Owned					
1. Title of Security (Instr. 3) Date (Month/D				Execution Date,			e, Transaction Dispo Code (Instr. 5)			es Acquired		4 and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
	,			Date (Month/D	ay/Year)	if any		Code (I			of (D) (Instr.	3, 4 and	Beneficia Owned Fe	lly ollowing	(D) or	Indirect str. 4)	Beneficial Ownership	
					ay/Year)	if any		Code (I			(A) or (D)	3, 4 and Price	Beneficia	lly bllowing on(s)	(D) or	Indirect str. 4)	Beneficial	
			Table II - I	(Month/D	ive Sec	if any (Month/Day/Y	rear)	Code (I 8) Code red, D	v v vispo	5) Amount Sed of, ((A) or (D)	Price	Beneficia Owned Fe Reported Transacti (Instr. 3 a	lly bllowing on(s)	(D) or	Indirect str. 4)	Beneficial Ownership	
1. Title of				(Month/D	ive Sec	if any (Month/Day/Y	rear)	Code (I 8) Code red, D	v v vispo	5) Amount Sed of, ((A) or (D)	Price	Beneficia Owned Fe Reported Transacti (Instr. 3 a	lly bllowing on(s)	(D) or	Indirect str. 4)	Beneficial Ownership	

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (8)	Instr.		r osed) r. 3, 4			onth/Day/Year) Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	06/30/2004		A ⁽³⁾		88		08/08/1988 ⁽¹⁾	08/08/1988 ⁽¹⁾	Common Stock	88	\$10.4	15,453	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.

Patricia A. Beithon, Attorneyin-Fact for J. Patrick Horner Date

07/01/2004

** Signature of Reporting Person

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

 \ast 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.