FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL

l	OMB Number:	3235-0287
l	Estimated average bu	rden
۱	hours per response:	0.5

## 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>Johnson Lloyd Emerson</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol APOGEE ENTERPRISES, INC. [ APOG ]							(Ch	5. Relationship of Reporting Person(s) to Is (Check all applicable) X Director 10% C			Issuer Owner	
					3. Date of Earliest Transaction (Month/Day/Year) 06/28/2018								Officer below)	(give title	Oth belo	er (specify w)	
(Street) CHARLOTTE NC 28277  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)							Y Form	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
1 Title of 9	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction  3. Transaction  4. Securities Acquired (A) or Transaction  3. Transaction  4. Securities Acquired (B) or Transaction  4. Securities Acquired (B) or Transaction  3. Transaction  4. Securities Acquired (B) or Transaction  4. Securities Acquired (B) or Transaction  3. Transaction  4. Securities Acquired (B) or Transaction  4. Securities Acquired (B) or Transaction  4. Securities Acquired (B) or Transaction  3. Transaction  4. Securities Acquired (B) or Transaction																
Date					Execution Date,			Transaction Disposed Of (D) (Instr. 3, 4)					Securitie Benefici	es ally Following	Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect	
								Code	Amou	nt (A) or (D)		Price	Transac (Instr. 3	tion(s)		(3 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/Year)	Code	Transaction Code (Instr.		tive ties red sed	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Sec Und Deri	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	n Title		Amount or Number of Shares					
Restricted Stock Units	(1)	06/28/2018		A		1,952		(2)	(2)		mmon tock	1,952	\$0.00	1,952	D		

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit represents a contingent right to receive one share of Apogee Enterprises, Inc. common stock.
- 2. The Restricted Stock Units vest over a three year vesting period with one-third of the units vesting on each anniversary of the award. Vested shares will be delivered to the reporting person following the date the reporting person no longer serves as a director of Apogee Enterprises, Inc. in accordance with the election of the reporting person, or following the occurrence of other events specified in the Plan.

## Remarks:

/s/ Patricia A. Beithon, Attorney-in-Fact for Lloyd E. 07/02/2018 **Johnson** 

\*\* 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.