FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigton,	D.O. 20040	

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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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*				2. Is AF	2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES, INC. [APOG]									heck all app	nship of Reporting Pe I applicable) Director		erson(s) to Issuer		
(Last)	ast) (First) (Middle) 7 CHESAPEAKE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/31/2018									Office below	er (give title v)		Other (below)	specify
(Street) GIBSONIA PA 15044				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
			le I - Non			_				Disp		-			_				
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					Execution Date		e, Transaction Code (Instr.					Benefi	ies Fore cially (D) Following (I) (I		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	unt (A) or (D)			Transa	Transaction(s) (Instr. 3 and 4)			(1130.4)	
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	Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 8)		n of Expiration Date (Month/Day/Year) Securities Acquired Deriv			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	OI N Of	umber					
Phantom Stock Units ⁽¹⁾	\$0.00 ⁽²⁾	03/31/2018			A		490		(1)		(1)	Commo		490	\$43.35	7,355		D	
Phantom Stock Units ⁽¹⁾	\$0.00 ⁽²⁾	03/31/2018			A ⁽³⁾		24		(1)		(1)	Commo		24	\$43.35	7,379		D	
Restricted Stock Units ⁽⁴⁾	\$0.00 ⁽²⁾	03/31/2018			A ⁽⁵⁾		18		(4)		(4)	Commo Stock		18	\$43.35	5,164		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 in accordance with the election of the reporting person, or following the occurrence of other events specified in the Plan.
- 3. Units acquired pursuant to a dividend equivalent reinvestment feature of the Deferred Compensation Plan for Non-Employee Directors.
- 4. The restricted stock units were allocated under the 2009 Non-Employee Director Stock Incentive Plan. The units of restricted stock will be settled in shares of common stock following the director's termination from the Board in accordance with the election of the reporting person, or following the occurrence of other events specified in the Plan.
- 5. Units acquired pursuant to a dividend equivalent reinvestment feature of the 2009 Non-Employee Director Stock Incentive Plan.

Remarks:

/s/ Patricia A. Beithon,

Attorney-in-Fact For Donald 04/03/2018

A. Nolan

** 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.