SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

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 [*] Alvord Christina M	2. Date of E Requiring S (Month/Day 01/14/202	tatement (Year) APOGEE ENTERPRISES, INC. [APOG]								
(Last) (First) (Middle) C/O APOGEE ENTERPRISES, INC. 4400 WEST 78TH STREET, SUITE 520			Issuer	ationship of Reporting k all applicable) Director	Person(s) to 10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year) 01/16/2020			
				Officer (give title below)	Other below)	(specify)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting			
(Street) MINNEAPOLIS MN 55435								Person	by More than One	
(City) (State) (Zip)										
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				unt of Securities cially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock				0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)					se Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
	Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

Remarks:

The Form 3 has been amended to attach Exhibit 24: Power of Attorney that was omitted from the original filing.

/s/ Judith A. Stone,	
Attorney-in-Fact for	
Christina M. Alvord	

** Signature of Reporting Person

12/17/2020

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 5 (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.

POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS, that I, Christina M. Alvord, hereby constitute and appoint James S. Porter, Patricia A. Beithon, David Wright Walstrom and Judith A. Stone and each of them, my true and lawful attorneys-in-fact and agents, with full power of substitution and resubstitution for me and in my name, place and stead, to sign any reports on Form 3 (Initial Statement of Beneficial Ownership of Securities), Form 4 (Statement of Changes in Beneficial Ownership of Securities) and Form 5 (Annual Statement of Changes in Beneficial Ownership of Securities) relating to transactions by me in Common Stock or other securities of Apogee Enterprises, Inc. and all amendments thereto, and to file the same, with the Securities and Exchange Commission and the appropriate securities exchange, granting unto said attorneys-in-fact and agents, and each of them, or their substitutes, full power and authority to do and perform each and every act and thing requisite or necessary to be done in and about the premises, as fully to all intents and purposes as I might or could do in person, hereby ratifying and confirming all that said attorneys-in-fact and agents, and each of them, or their substitutes, may lawfully do or cause to be done by virtue hereof. This Power of Attorney shall be effective until such time as I deliver a written revocation thereof to the above-named attorneys-in-fact and agents.

By: /s/ Christina M. Alvord Christina M. Alvord

Date: January 14, 2020