FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average t | ourden | | | | | | | | |

0.5

hours per response:

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 | on 30(h) o | of the Í | nvestmen | Con | npany Act | of 194 | .0 | | | | | | |
|---|---|------------|---|---------|--|---|--------------|----------|--|--------|------------------|--|--|---|---|---|---|--|--|
| 1. Name and Address of Reporting Person * Davis Jerome L | | | | | 2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES, INC. [APOG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| (Last) 15304 L | (First) (Middle) INN PARK TERRACE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/25/2015 | | | | | | | | | | Officer (give title below) | | Other (s below) | specify |
| (Street) LAKEWOOD RANCH FL 34202 | | | | 4. It | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Lin | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| | | | | | | | | | | | | | | Foi | Form filed by More than One Person | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | ative | Sec | curities | s Acc | quired, | Disp | osed o | of, or | Ber | neficial | ly Owr | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date) | | | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | Secu Bene Own | ecurities eneficially wned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | nount (A) or (D) | | Price | Trans | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| | | Т | able II - | | | | | | uired, D , option | | | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, | ate, Transaci Code (In | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price Derivati Security (Instr. 5) | | ive ies cially ing ed ction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | c | Code | v | (A) | | Date Exercisabl | | xpiration ate | Title | | Amount or Number of Shares | ber | | | | |
| Restricted Stock | (1) | 06/25/2015 | | | A | | 1,362 | | (2) | | (2) | Comm | | 1,362 | \$0.00 | 1,3 | 362 | 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 Jerome L. 06/26/2015 Davis

** 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.