FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI |
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| OMB APPRO | DVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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>Hays Sara L</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES, INC. [APOG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own | | | | | |
|---|--|--|---|---------|--|---|---------|-----------------|--|----------|----------------|---|---|--|---|--------------------|---|---|---------|
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2013 | | | | | | | | | Office below | r (give title) | | Other (s | specify |
| 2131 WEST SHAKESPEARE AVENUE | | | | | | | | | | | | | | | | 1:40 | - 11 | (6) 1.4 | |
| (Street) CHICAGO IL 60647 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ine) X | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (Si | tate) (| (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non- | -Deriva | ative | Sec | curitie | es A | cquired, [| Disp | osed | of, or Be | enefic | ally (| Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Dat | | | Code (Instr. 5) | | | | | and | Securiti Benefic | curities Formation Formation Following (I) | | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | t (A) or (D) | | ا ؞ | Transac (Instr. 3 | ction(s) | | | (111311. 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) | | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative (Instr. 3 ar | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | Ex Da | piration te | Title | Amour or Number of Shares | r | | | | | |
| Phantom Stock Units ⁽¹⁾ | \$0 ⁽²⁾ | 12/31/2013 | | I | A ⁽³⁾ | | 52 | | (1) | | (1) | Common Stock | 52 | \$3 | 35.91 | 20,818 | | 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.

/s/ Patricia A. Beithon,

Attorney-in-Fact for Sara L. 01/03/2014

<u>Hays</u>

** 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.