## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to	STATE
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

#### EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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*  BEITHON PATRICIA A  (Last) (First) (Middle)  4400 WEST 78TH STREET  SUITE 520						Issuer Name and Ticker or Trading Symbol APOGEE ENTERPRISES, INC. [ APOG ]      Date of Earliest Transaction (Month/Day/Year)     04/29/2015  4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Secretary  6. Individual or Joint/Group Filing (Check Applicable					
(Street) MINNE	APOLIS M		55435 Zip)			Amendment, Date of Original Fried (World) Day/Tea									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				Date	th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Secur Benefi Owner	cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership	
		Code	v	Amount						(A) or (D)	Price	e	Repor Transa (Instr.	action(s) 3 and 4)		(Instr. 4)				
Common Stock 0.				04/29	9/2015				F		539		D	\$53	3.14	19	0,803(1)	D		
Common	Stock			04/30	/2015				A		3,010	2)	A	\$0.00 193,813 D						
Common	Stock			04/30	/2015				F		980		D	\$52	2.62	2 192,833 D				
Common	Stock														3,576 <sup>(3)</sup> I 401(k) Plan					
	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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		n Date, ay/Year) _	4. Transa Code ( 8)	Instr	or. Of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiratio Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares			nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

### **Explanation of Responses:**

- 1. Includes shares acquired under the Employee Stock Purchase Plan as of 3/31/15 and shares of restricted stock granted under the Amended and Restated 2002 Omnibus Stock Incentive Plan and 2009 Stock Incentive Plan.
- 2. Shares vest over a three year vesting period with one-third of the shares vesting on each anniversary of the award.
- 3. Represents the approximate number of shares of common stock for which the Reporting Person has the right to direct the vote under the Apogee 401(k) Retirement Plan per the Trustee's 3/31/15 statement. Shares of common stock are not directly allocated to the Plan participants, but are instead held in a unitized fund consisting primarily of common stock and a small percentage of short-term investments. participants acquire units in this fund.

# Remarks:

/s/ Judith A. Stone, Attorneyin-Fact for Patricia A. Beithon

05/01/2015

\*\* Signature of Reporting Person

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.