SEC Foi	rm 4 FORM	4 l	JNITE) STA	TES S	ECURITI	ES Al	ND E	ХСНА	NGE	со	ммі	SSION				
						Washington, D.C. 20549									OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See					I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								HIP	Estim	OMB Number: 3235- Estimated average burden hours per response:		
1. Name and Address of Reporting Person [*] <u>POMPA MARK A</u>					2. Issuer Name and Ticker or Trading Symbol <u>APOGEE ENTERPRISES, INC.</u> [APOG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	`	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/28/2024								Officer below)	(give title	give title Other below)		
C/O APOGEE ENTERPRISES, INC. 4400 WEST 78TH STREET, SUITE 520					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) MINNEAPOLIS MN 55435											Form filed by More than One Reporting Person						
(City) (State) (Zip)			(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										led to		
		Tab	le I - Noi	ו-Deriv	ative Se	ecurities Ad	cquired	d, Dis	posed	of, or E	Bene	ficially	y Owne	d			
Date					action Day/Year)	2A. Deemed Execution Date if any (Month/Day/Yea	Cod	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
							Cod	e V	Amount	(A) (D)) or)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)
		Т				urities Acc ls, warrants							Owned				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date curity or Exercise (Month/Day/Year		Execution Date, T if any C		4. Transactio Code (Inst 8)	ansaction of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	curity Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)

Units⁽⁴⁾ Explanation of Responses:

\$0⁽²⁾

\$0⁽²⁾

03/28/2024

03/28/2024

1. The phantom stock units were allocated under the Deferred Compensation Plan for Non-Employee Directors. The phantom stock units 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.

Date Exercisable

(1)

(4)

Expiration Date

(1)

(4)

Title

Commor

Stock

Common

Stock

2. Settled 1-for-1

Phantom

Stock Units⁽¹⁾

Deferred Restricted

Stock

3. Additional phantom stock units acquired pursuant to a dividend equivalent reinvestment feature of the Deferred Compensation Plan for Non-Employee Directors.

Code v

A⁽³⁾

A⁽⁵⁾

(A) (D)

41

79

4. The deferred restricted stock units were allocated under the 2009 Non-Employee Director Stock Incentive Plan and the 2019 Non-Employee Director Stock Plan. The deferred restricted stock units 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. Additional deferred restricted stock units acquired pursuant to a dividend equivalent reinvestment feature of the 2009 Non-Employee Director Stock Incentive Plan and the 2019 Non-Employee Director Stock Plan

Remarks:

/s/ Meghan M. Elliott, Attorney-in-Fact for Mark A.

Pompa

Amount or Number

41

79

\$59.2

\$59.2

of Shares

04/01/2024

9,641

18,995

D

D

** 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.