Edgar Filing: TREX CO INC - Form 4

TREX CO II	NC												
Form 4													
July 31, 2014	4												
FORM	4						~			OMB AF	PROVAL		
	UNITED	STATES				ND EX(D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box					GES IN BENEFICIAL OWNERSHI					Expires:	January 31,		
											2005		
	Section 16. SECURITIES									Estimated average burden hours per			
Form 4 o										response	. 0.5		
Form 5 obligation	*							•	e Act of 1934,				
may cont	Section 170	· /		•		0	· ·		1935 or Section	1			
See Instru	uction	30(h)	of the In	vestme	ent (Compan	y Ac	t of 194	0				
1(b).													
(Print or Type F	Responses)												
(Thin of Type I	(csponses)												
1. Name and A	ddress of Reporting	Person *	2 Issuer	· Name a	and	Ticker or	Tradii	וס	5. Relationship of	Reporting Person(s) to			
MERLOTTI FRANK H JR Symbol				r Name and Ticker or Trading				15	Issuer	1 0			
			•	CO INC [TREX]									
				f Earliest Transaction (Check all applicable))			
(Last)	(First) (Middle)				ansaction			X Director	10%	Owner		
(Month/D C/O TREX COMPANY, INC., 160 07/29/20				-					Officer (give title Other (specify				
EXETER D			0112712	011					below)	below)			
	(Street)		4 If Ame	ndment	Dat	e Original			6 Individual or Io	int/Group Filin	or (Check		
· · · · · · · · · · · · · · · · · · ·				endment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line)				
						X Form filed by C	X_Form filed by One Reporting Person						
WINCHEST	ГЕR, VA 22603-	8605							Form filed by M Person	ore than One Re	porting		
		(77.)							reison				
(City)	(State)	(Zip)	Tabl	e I - Noi	n-Do	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3.		4. Securit			5. Amount of	6. Ownership			
Security	(Month/Day/Year)		on Date, if		ctio	n(A) or Di	~		Securities	Form: Direct			
(Instr. 3)	any (Month/I	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)				5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership				
		((~)				Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
G				Code	V	Amount	(D)	Price	(msu. 5 and 4)				
Common Stock	07/29/2014			A <u>(1)</u>		1,958	А	\$ 28.08	6,756	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MERLOTTI FRANK H JR C/O TREX COMPANY, INC. 160 EXETER DRIVE WINCHESTER, VA 22603-8605	Х							
Signatures								
/s/ William R. Gupp by power of attorney	07/31/2014							
<pre>**Signature of Reporting Person</pre>		Date						
Explanation of Responses:								

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).

(1) This restricted award will vest on the first anniversary of the grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.