FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL						
OMB Number:	3235-0287						
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hours per respons	se: 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* KAPLAN RONALD W						2. Issuer Name and Ticker or Trading Symbol TREX CO INC [TREX]									Relationsh heck all ap X Dire	plicable)	Person(s) to Issuer 10% Owner		
	X COMP	First) ANY, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/01/2018									Offi belo	cer (give title w)		Other (specify below)	
160 EXETER DRIVE					4. If	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				
WINCHESTER VA 22603-8605			8605	_										Form filed by More than One Reporting Person					
(City)	(State)	(Zip)																
		Tal	le I - N	on-Deriv	<i>r</i> ative	Se	curit	ies Ac	quired	d, Di	sposed o	f, or I	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date		n Date,	3. Transaction Code (Instr. 8)			es Acquired (A) o Of (D) (Instr. 3, 4 a			5) Secu Bene	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price		rice	Trans	action(s) . 3 and 4)		(111511.4)	
Common Stock 08/01/20					/2018	018		S		2,596	D \$78		78.19) ⁽¹⁾	14,820	D			
Common Stock 08/01/20				/2018	.018		S		1,750	D \$78		78.88	38 ⁽²⁾ 13,070		D				
		7	able II -								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	n Date, Transac Code (Ir				6. Date Exercis Expiration Date (Month/Day/Yea		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Shai	ber					

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$77.74 to \$78.74, inclusive. The reporting person undertakes to provide Trex Company, Inc., any security holder of Trex Company, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in Footnote (1) to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$78.75 to \$79.19, inclusive. The reporting person undertakes to provide Trex Company, Inc., any security holder of Trex Company, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in Footnote (2) to this Form 4.

/s/ William R. Gupp by power of attorney

08/03/2018

** 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.