FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL |
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| l | OMB Number: | 3235-0287 | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| l | 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* | | | | | 2. Issuer Name and Ticker or Trading Symbol TREX CO INC [TREX] | | | | | | | | | elationship o eck all applic X Directo | , | | on(s) to Issi 10% Ov | |
|---|---|--|---|----------------|--|---|---|----------------------------------|--|-------------------------|--|---|---|---|---|-----------------------------------|--|--|
| | (Firs | IY, INC. | 1iddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/26/2011 | | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| 160 EXETER DRIVE (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line |) | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person | | | |
| WINCHESTER VA 22603-860 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (Sta | te) (Z | ip) | | | | | | | | | | | | | | | |
| | | Table | e I - Non- | Deriv | ative | Seci | urities | Acc | quired, | Dis | posed o | f, or Bei | neficiall | y Owned | | | | |
| Date | | | | Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disp Code (Instr. | | 4. Securiti Disposed | curities Acquired (A) o sed Of (D) (Instr. 3, 4 a | | 5. Amour Securitie Beneficia Owned F Reported | s ally ollowing | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transact (Instr. 3 a | ion(s) | | | 11301. 4) |
| Common Stock 07/26/ | | | | /2011 | | A | | 709(1) | 9 ⁽¹⁾ A \$ | | 5 1,3 | 1,157 | | D | | | | |
| | | Ta | able II - D (e | | | | | | | | osed of, onvertib | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | n Date, T | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | е | d 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Appreciation Right | \$21.15 | 07/26/2011 | | | A | | 1,284 | | 07/26/20 | 11 | 07/26/2021 | Common Stock | 1,284 | \$0 | 1,284 | 1 | D | |

Explanation of Responses:

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

<u>/s/ William R. Gupp by power</u> of attorney

07/28/2011

** 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.