FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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).

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*  MONAHAN HAROLD F						2. Issuer Name <b>and</b> Ticker or Trading Symbol TREX CO INC [ TWP ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MONAHAN HAROLD F					1											Directo	10% Own		vner		
						Date of Earliest Transaction (Month/Day/Year)										Officer below)	(give title		Other (s below)	specify	
(Last) (First) (Middle)						/08/2						,				Exec	VP and C	ener	al Manage	or	
160 EXETER DRIVE						55, 55, 2505										Exec VP and General Manager					
(Street)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
` '		22603-8605											X Form filed by One Reporting Person								
													Form fi Person		by More than One Repor		rting				
(City)	(	State)	(Zip)													Person					
		Ta	ble I - Nor	า-Deriv	/ativ	e Se	curitie	s Ac	qui	red, [	Disp	osed o	f, or	Bene	eficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transac						n	2A. Deem		3. 4. Securities Acquired (A)						5. Amou		6. Ownership		7. Nature of		
				Date (Month/	e nth/Day/Year)		Execution if any	Code (Instr. 5			Disposed Of (D) (Instr. 3, 4			3, 4 and	Securitie Beneficia	ially ([		orm: Direct ) or Indirect (Instr. 4)	Indirect Beneficial Ownership		
						(Month/Day/Yea		ا ("	<del>"</del>						- Reported	ı	(1) (111		(Instr. 4)		
										Code	V	Amount		A) or D)	Price	Transact (Instr. 3 a	ion(s) ınd 4)				
Common Stock 03/08					8/200	/2005				A		2,696 <sup>(1)</sup> A S		\$0.01	42,	,696		D			
			Table II -	Deriva	tive	Sec	urities	Aca	ıuire	ed. Di	ispo	sed of.	or B	enef	icially	Owned		,	<u>'</u>		
												onvertib									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)		5. Numbor of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es d ed nstr.	6. Date Exercisal Expiration Date (Month/Day/Year			of Secu Underly Derivat		Title and Amount Securities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	i S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exer	e rcisable		Expiration Date	Title		Amount or Number of Shares						
Stock Options (Right to buy)	\$46.71	03/08/2005			A		15,576		03/0	08/2006 <sup>(</sup>	(2) 0	03/08/2015	Comi		15,576	\$0	15,57	6	D		
Stock Options (Right to	\$46.71	03/08/2005			A		4,770		03/0	08/2005 <sup>(</sup>	(3)	03/08/2015	Comi		4,770	\$0	20,34	6	D		

## Explanation of Responses:

- 1. This restricted stock award vests over a three-year period in three equal annual installments beginning on the first anniversary of the grant date.
- $2. \ The \ options \ become \ exerciseable \ in \ three \ equal \ annual \ installments \ beginning \ on \ the \ first \ anniversary \ of \ the \ transaction \ date.$
- 3. The options are exerciseable as of the grant date.

Lynn E MacDonald

03/10/2005

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.