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BUCK ROB Form 4	ERT R										
December 26	5, 2018										
FORM	14 UNITED	STATES	SECUE	TIFS A	ND FY	CHA	NCF (OMMISSION		PROVAL	
	UNITED	SIAILS		shington,			NGE C	01011011551010	OMB Number:	3235-0287	
Check this box if no longer STATEMENT		MENT O		0			LOW	NERSHIP OF	Expires:	January 31, 2005	
In the folger Statement of Changes in Beneficial ownership of Section 16. Section 16. Section 16. Form 4 or Section 16. Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, See Instruction 1(b). Section 17(a) of the Public Utility Holding Company Act of 1940											
(Print or Type F	Responses)										
BUCK ROBERT R Symbo BEAC			Symbol					5. Relationship of Reporting Person(s) to Issuer			
			BEACON ROOFING SUPPLY INC [BECN]					(Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/Da			f Earliest Transaction Day/Year)				Director 10% Owner Officer (give title Other (specify				
505 HUNTN 300	MAR PARK DR	, SUITE	12/23/20	-				below)	below) Chairman		
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
HERNDON	, VA 20170							Person	fore than One Re	porung	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock, \$0.01 par value	12/23/2018			М	6,387	A	\$ 0	41,673	D		
Common Stock, \$0.01 par value	12/23/2018			F	1,556 (1)	D	\$ 31.29	40,117	D		
Common Stock, \$0.01 par								881	Ι	By 401(k) plan	

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value

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)

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. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units (RSUs)	(2)	12/23/2018		М	6,387	<u>(3)</u>	(3)	Common Stock, \$0.01 Par Value	6,387	\$

Reporting Owners

Reporting Owner Name / Addro	Relationships						
	Director	10% Owner	Officer	Other			
BUCK ROBERT R 505 HUNTMAR PARK DR SUITE 300 HERNDON, VA 20170			Chairman				
Signatures							
/s/ Robert R. Buck	12/26/2018						

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Represents shares withheld to cover the tax liability related to the settlement of RSUs, per Company policy

**Signature of

Reporting Person

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- (2) Restricted stock units convert into common stock on a one for one basis.
- (3) On December 23, 2015, the reporting individual was granted restricted stock units which vested and settled on the third anniversary of the grant date.

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.