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BEACON R Form 4 July 11, 201	COOFING SUP	PLY INC									
	лл								OMB AF	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this box if no longer				0 /					Expires:	January 31,	
subject t Section Form 4 o Form 5	o STAT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934								2005 average rs per 0.5	
obligatic may con <i>See</i> Instr 1(b).	tinue. Section			tility Hold vestment	•	· ·		1935 or Sectior 0	1		
(Print or Type)	Responses)										
Cooper Ross D Sy			Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer			
			[BECN]		110 50			(Check all applicable)			
(Month			3. Date of (Month/D 07/07/20	•	ansaction			Director10% Owner X Officer (give title Other (specify below) below) Executive Vice President, GC			
FLOOR	-)) -		0110112	010				Executive	vice President	l, GC	
BETHESD	(Street) A, MD 20816			ndment, Da hth/Day/Year)	-	l		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	one Reporting Pe	rson	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securinn(A) or Di (Instr. 3,	ties Ad sposed	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Int of 6. 7. Nature es Ownership Indirect ially Form: Direct Beneficia (D) or Ownersh ng Indirect (I) (Instr. 4) d (Instr. 4) tion(s)		
Common stock, \$0.01 par value	07/07/2016			M <u>(1)</u>	1,549	A	\$ 15.47	5,255	D		
Common stock, \$0.01 par value	07/07/2016			S <u>(1)</u>	1,549	D	\$ 47.5	3,706	D		
Common stock, \$0.01 par	07/07/2016			M <u>(1)</u>	3,148	А	\$ 18.72	6,854	D		

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value								
Common stock, \$0.01 par value	07/07/2016	S <u>(1)</u>	3,148	D	\$ 47.5	3,706	D	
Common stock, \$0.01 par value	07/07/2016	S <u>(1)</u>	3,706	D	\$ 47.5	0	D	
Common stock, \$0.01 par value						1,531	I	by 401(k) plan

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. Transactio Code (Instr. 8)	Transaction Derivative Code Securities		cisable and Date /Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De Sec (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option (right to buy)	\$ 15.47	07/07/2016		M <u>(1)</u>	1,549	(2)	11/16/2020	Common stock, \$0.01 par value	1,549	
Stock option (right to buy)	\$ 18.72	07/07/2016		M <u>(1)</u>	3,148	(3)	11/18/2021	Common stock, \$0.01 par value	3,148	

Reporting Owners

Reporting Owner Name / Address

Relationships

Executive Vice President, GC

Director 10% Owner Officer

Other

Cooper Ross D 5244 RIVER ROAD; SECOND FLOOR BETHESDA, MD 20816

Signatures

Joseph M. Nowicki, Attorney-in-Fact

07/11/2016

**Signature of Reporting Person

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 sale was made pursuant to a 10b5-1 plan

(2) The option was fully vested and exercisable as of 11/16/2013

(3) The option was fully vested and exercisable as of 11/18/2014

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.

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