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Tronox Ltd											
Form 4											
February 13,	2017										
FORM	14									PPROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi if no long	er								Expires:	January 31, 2005	
subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OI SECURITIES					Estimated average burden hours per response 0.		
Form 5	Filed put	rsuant to S	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,		0.0	
obligation	¹⁸ Section 17						•	1935 or Section	n		
may conti <i>See</i> Instru 1(b).		30(h)	of the In	vestment	Compan	y Ac	t of 194	0			
(Print or Type R	Responses)										
Romano John D Symbol			er Name and Ticker or Trading x Ltd [TROX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
											(Last)
(Month/D			/Day/Year)				Director 10% Owner				
	FORD PLAZA, BLVD, SUITE 1		02/10/2	017				Officer (give below) SVP, Chief	title Othe below) f Commercial C	er (specify Officer	
(Street) 4. If Amer			ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
STAMFORI	D, CT 06901							Person		porting	
(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 Dat (Month/Day/Year)	Executio any		3. Transactic Code (Instr. 8)	(Instr. 3,	(A) or	d of (D) 5)	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				Code V		(D)	Price				
Stock Class A	02/10/2017			F	3,014 (1)	D	\$ 13.99	288,272	D		

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)

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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. Transactic Code (Instr. 8)	5. orNumber of 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. Pric Deriv: Securi (Instr.
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Options (right to buy)	\$ 25.9					(2)	06/26/2022	Class A Common Stock	18,695 (2)	
Common Stock Options (right to buy)	\$ 19.09					(2)	02/25/2023	Class A Common Stock	95,710 (2)	
Common Stock Options (right to buy)	\$ 21.98					<u>(3)</u>	02/10/2024	Class A Common Stock	26,894 (3)	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Romano John D ONE STAMFORD PLAZA 263 TRESSER BLVD, SUITE 1100 STAMFORD, CT 06901			SVP, Chief Commercial Officer					
Signatures								
/s/ Richard L. Muglia, as attorney-in-fact	02/13/20	017						
**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)

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The Company withheld 3,014 shares to satisfy withholding tax obligations and Mr. Romano received the balance of 5,245 shares of previously granted restricted common stock.

(2) As reported on Form 4 filed on 10/11/2013, the options vest in three equal installments on the anniversary date of the grant.

(3) As reported on Form 4 filed 2/12/2014, the options vest in three equal installments on the anniversary date of the grant.

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.