NEWMARKET CORP

Form 4

November 15, 2016

FORM	<i>1</i> 4				OMB AF	PPROVAL		
1 0111	UNIT	ED STATE	S SECURITIES AND EXCHANGE Washington, D.C. 20549	COMMISSION	OMB Number:	3235-0287		
Check t if no los	nger	PENJENIT O	<i>G</i> ,	WIEDCHID OF	Expires:	January 31, 2005		
subject Section	ιο	IEWENI O	F CHANGES IN BENEFICIAL OV SECURITIES	Estimated a burden hou	- U			
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type	Responses)							
1. Name and Address of Reporting Person * Hazelgrove Bruce R III			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of I Issuer	Reporting Person(s) to			
(Lost)	(First)	(Middle)	NEWMARKET CORP [NEU]	(Check	all applicable	e)		
(Last) (First) (Middle) 330 SOUTH FOURTH STREET		` '	3. Date of Earliest Transaction (Month/Day/Year) 11/11/2016					
	(Street)		4 If Amendment Date Original	oint/Group Filing(Check				

Filed(Month/Day/Year)

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(City)	(State)	(Zip) Ta	ble I - Non	-Derivativ	e Sec	urities Acq	uired, Disposed	of, or Benefic	ially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	ed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/11/2016		F	58 (1)	D	\$ 416.65	1,121	D	
Common Stock							20,923.7274 (2)	I	NewMarket Savings Plan (2)
Common Stock							670	I	by wife

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

Applicable Line)

Person

X Form filed by One Reporting Person Form filed by More than One Reporting

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						· ·
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	Date	Title IN	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hazelgrove Bruce R III 330 SOUTH FOURTH STREET RICHMOND, VA 23219

Vice President & CAO

Signatures

/s/ M. Rudolph West (by POA for Bruce R. Hazelgrove, III)

11/15/2016

**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).
- On October 24, 2013, the Compensation Committee of the Board of Directors of NewMarket Corporation (the "Company") approved stock awards to be granted on November 11, 2013 (the "Award Date") pursuant to the Company's 2004 Incentive Compensation and Stock Plan. The stock vested on November 11, 2016. The disposition being reported on this Form 4 represents the shares withheld in satisfaction of the withholding tax liability.
- (2) The increase in shares is due to periodic purchases by the Plan Trustee pursuant to the Plan.

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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