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Trent Melani	ie Montague										
Form 4											
May 10, 201	0										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PROVAL	
	UNITED	STATES					NGE C	COMMISSION	OMB	3235-0287	
Check thi	is box		was	hington,	D.C. 20	549			Number:	January 31,	
if no long	rer		E CILAN	CECINI	DIANIDA				Expires:	2005	
subject to)		r Chan	GES IN BENEFICIAL OWNERSHIP				NERSHIP OF	Estimated average		
Section 1 Form 4 or				SECURITIES					burden hours per		
Form 5		repart to 9	Section 1	6(a) of the	- Securit	ies F	vchang	e Act of 1934,	response	0.5	
obligation	ns Section 17						U	1935 or Section	า		
may cont	inue.			vestment	•	· ·			1		
See Instru 1(b).	iction	()				5		-			
(Print or Type F	Responses)										
1. Name and A	ddress of Reporting	g Person *	2. Issuer	Name and	Ticker or	Tradii	ng	5. Relationship of	Reporting Pers	on(s) to	
Trent Melan	ie Montague		Symbol					Issuer			
			ROWA	N COMP.	ANIES I	NC [[RDC]			、 、	
(Last)	(First)	(Middle)	3 Date of	Earliest Tr	ansaction			(Cnec)	k all applicable)	
()	()	()	(Month/D		unsuetion			Director	10%	Owner	
2800 POST OAK BLVD, SUITE 05/08/20				-			_X_Officer (give titleOther (specify				
5450								below) below) VP & Corporate Secretary			
	(Street)		4 If Ama	ndmant Da	ta Origina				-	-	
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
							_X_Form filed by One Reporting Person				
HOUSTON	, TX 77056							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year	on Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct			
(Instr. 3)		any (Manth/I	Day/Vaar)	Code (Instr. 3, 4 and 5) (Instr. 8)				2	· /	Beneficial	
		(INIOIIUI/I	Day/Year)	(111501.0)				Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
						(A)		Reported		(,	
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common							\$				
Stock	05/08/2010			F	595 <u>(1)</u>	D	26.94	27,061 <u>(3)</u>	D		
Storn							(2)				

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. Transact Code (Instr. 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Trent Melanie Montague 2800 POST OAK BLVD SUITE 5450 HOUSTON, TX 77056			VP & Corporate Secretary				
Signatures							
/s/ Melanie M. Trent 05,	/10/2010						
<u>**</u> Signature of	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). **
- These shares were sold to the company in payment of a tax liability due to the vesting of restricted stock awarded to the reporting person. (1) Such restricted stock vested on May 8, 2010.
- (2) Sales price is the average of the high and low sales price on May 7, 2010.
- (3) Includes 20,056 shares of restricted stock held by the reporting person.

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.

Reporting Person