FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | | |
|------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
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| hours per response: | 0.5 | | | | | |

Check this box if no longer subject to Section 16. 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 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* SLATER THOMAS G JR | | | | | | 2. Issuer Name and Ticker or Trading Symbol TREDEGAR CORP [TG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
|--|--|------|-------|--------|---|---|---|------------------------------|--|-----|--------------------|---|-----------------|---------------------|---|---|--|---|--------------------------|--|--|--|
| | | | | | | | | | | | | | | _ | X | Office | etor er (give title | | 10% Owner Other (specify | | | |
| (Last) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/30/2007 | | | | | | | | below) below) below) | | | | | | | |
| HUNTON & WILLIAMS | | | | | | | | | | | | | | | | | | | | | | |
| 951 EAST BYRD STREET | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | | | |
| RICHMOND VA 23219 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | | f any | med on Date, Day/Year) | Transaction Dispose Code (Instr. 5) | | Disposed | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Secu | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (| A) or D) | Price | , · | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) | | |
| Tredegar | Common S | tock | 03/30 |)/2007 | | | | A | | 100 | | A | \$22.79 | | 4,300 | | D | | | | | |
| Tredegar | | | | | | | | | | | 3,200 | | I | | By Wife | | | | | | | |
| 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) | ivative Conversion Date Execu- curity or Exercise (Month/Day/Year) if any | | | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Prio Deriva Secur (Instr. | vative ırity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | n: ct (D) direct | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nur of | ount nber res | | | | | | | | |

Explanation of Responses:

Remarks:

Patricia A. Thomas, Attorney-

In-Fact

** Signature of Reporting Person

Date

04/03/2007

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.