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								PPROVAL 3235-0287 January 31, 2005 Iverage rs per 0.5	
(Print or Type Responses)									
1. Name and Ac GARDA RO	2. Issuer Name an Symbol POLYONE COI			ng	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	(Middle) 3. Date of Earliest Trans				(Cnec.	k all applicable)		
POLYONE (WALKER R	(Month/Day/Year) 06/30/2005	-				X_ Director 10% Owner Officer (give title Other (specify below) below)			
			dment, Date Original			6. Individual or Joint/Group Filing(Check			
AVON LAK	Filed(Month/Day/Yea	ar)			Applicable Line) _X_ Form filed by One Reporting Person 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)	any	ion Date, if Transact Code n/Day/Year) (Instr. 8)	3. 4. Securities Acquired if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 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)	Indirect Beneficial	
Common Stock	06/30/2005	А	1,889	A	\$ 6.615	9,386	D		
Common Stock	06/30/2005	А	1,181	А	\$ 6.615	30,009	I	Deferred Comp Plan	
Common Stock						14,522	Ι	by Spouse	

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

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information contained in this form are not
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(9-02)

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title Amour Underl Securit (Instr. 2	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh							
1	Director	10% Owner	Officer	Other					
GARDA ROBERT A POLYONE CENTER 33587 WALKER ROAD AVON LAKE, OH 44012	Х								
Signatures									
By: Wendy C. Shiba, Power of Attorney For: Robert A.									
Garda				07/05/2005					
<u>**</u> Signature of Rep		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).

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.