POLYONE CORP Form 4 August 03, 2015

## FORM 4

#### **OMB APPROVAL**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB** 3235-0287

January 31,

Check this box if no longer subject to Section 16.

Washington, D.C. 20549 Number: Expires:

2005 Estimated average burden hours per

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

Common

Common

Stock

Stock

07/30/2015

(Print or Type Responses)

1. Name and Address of Reporting Person * RICHARDSON BRADLEY C			2. Issuer Name <b>and</b> Ticker or Trading Symbol POLYONE CORP [POL]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
			(Month/l	Day/Year)			Director	10%	Owner		
POLYONE	7	07/30/2015				X Officer (give title Other (specify below)					
WALKER	ROAD						EVP & Chie	ef Financial Of	ficer		
		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check					
		Filed(Month/Day/Year)				Applicable Line)					
							_X_ Form filed by On				
AVON LA	KE, OH 44012						Form filed by Mo Person	re than One Rep	oorting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative Securities	s Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deeme	d	3.	4. Securities Acquire	ed (A)	5. Amount of	6.	7. Nature o		
Security	(Month/Day/Year)	Execution I	ecution Date, if		onor Disposed of (D)		Securities	Ownership	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)		Beneficially	Form:	Beneficial		
		(Month/Day	y/Year)	(Instr. 8)			Owned	Direct (D)	Ownership		
							Following	or Indirect	(Instr. 4)		
					(4)	`	Reported	oorted (I)			
					(A)		Transaction(s)	(Instr. 4)			

Code V

Ι

Amount

2,419.172 A

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 displays a currently valid OMB control number.

7,000

(Instr. 3 and 4)

2,419.172 (1) I

D

Price

34.12

of

Savings

Plan

Trust

#### Edgar Filing: POLYONE CORP - Form 4

#### 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		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(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		or		
							Date	Title N	Number		
							Date		of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

RICHARDSON BRADLEY C POLYONE CENTER 33587 WALKER ROAD **AVON LAKE, OH 44012** 

**EVP & Chief Financial Officer** 

## **Signatures**

By: Lisa K. Kunkle, Power of Attorney For: Bradley C. Richardson

08/03/2015

\*\*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).
- Reflects the transfer by the reporting person of funds invested in the PolyOne Retirement Savings Plan (the "Plan") into the PolyOne stock fund within 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.

Reporting Owners 2