## Edgar Filing: POLYONE CORP - Form 4

POLYONE CORP Form 4 January 03, 2017								
	ATES SECURITIES Washingto	AND EXCHA n, D.C. 20549	NGE C	COMMISSION	OMB AI OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Expires: Estimated a burden hou response	ours per						
(Print or Type Responses)								
1. Name and Address of Reporting Pers WALTERS FARAH M	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol POLYONE CORP [POL]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Midd POLYONE CENTER, 33587 WALKER ROAD	(Month/Day/Year) YONE CENTER, 33587 12/31/2016				X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street)	Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
AVON LAKE, OH 44012	a)			Person				
(City)(State)(Zip)Table1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		4. Securities ctionAcquired (A) ( Disposed of (I 8) (Instr. 3, 4 and (A) or	or D) 1 5)	SecuritiesFBeneficially(I)OwnedIn	<b>c, or Beneficial</b> 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial		
Common 12/31/2016 Stock	A	V Amount (D) 890 A		16,896	I	Deferred Comp Plan		
Common Stock				148,444	D			

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.

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 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)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Tran (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

**Reporting Owner Name / Address** 

WALTERS FARAH M POLYONE CENTER 33587 WALKER ROAD AVON LAKE, OH 44012 Signatures

Director

By: Lisa K. Kunkle, Power of Attorney for Farah M. Walters

\*\*Signature of Reporting Person

## **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).

Relationships

10% Owner Officer Other

A distribution of 60,867 shares was made from the Deferred Compensation Plan for Nonemployee Directors (the "Director Plan") on
(1) November 1, 2008. This distribution is reflected by a decrease of 60,867 shares in the Director Plan balance and an increase of 60,867 in the direct holdings in this report.

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.

01/03/2017

Date