## Edgar Filing: LIN SANDRA BEACH - Form 4

LIN SANDR	RA BEACH										
Form 4											
January 02, 2	2018										
FORM	FORM 4 LINUTED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check the									Expires:	January 31,	
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated	2005 average		
Section 1		SECURITIES							burden hou	urs per	
Form 4 o Form 5			Castian 14	(a) of the	C a avaitati			A -+ -f 1024	response	. 0.5	
obligation	no *							ge Act of 1934, If 1935 or Sectio	n		
may cont See Instru	inue.		) of the Inv	•	•	- ·			11		
1(b).											
(Print or Type I	Responses)										
1 Name and A	ddress of Reportin	σ Person *	2 Isonor	Name <b>and</b>	Tieker or (	Fradin	~	5. Relationship of	f Reporting Per	rson(s) to	
1. Name and Address of Reporting Person <u>*</u> LIN SANDRA BEACH			Symbol			llauiii	g	Issuer			
			•	NE CORI	P [POL]						
(Last)	(First)	(Middle)		Earliest Tra				(Chec	ck all applicabl	e)	
(Mor			(Month/D		insaction			_X_ Director10% Owner Officer (give titleOther (specify			
			12/31/20								
WALKER I	ROAD							below)	below)		
	(Street)		4. If Amer	ndment, Dat	e Original			6. Individual or Jo	oint/Group Fili	ng(Check	
			Filed(Mon	th/Day/Year)				Applicable Line)			
								_X_ Form filed by ( Form filed by N	One Reporting Po More than One Ro		
AVON LAP	KE, OH 44012							Person		1.6	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction D	ate 2A. De	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea		on Date, if	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)				Form: Direct	Indirect		
(Instr. 3)		any (Month	/Day/Year)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		× ×	,	~ /	× ,		·	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				<i>a</i>		or		(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	(, ,		Deferred	
Stock	12/31/2017			А	656	А	\$0	17,705 <u>(1)</u>	Ι	Comp Plan	
Common Stock								2,003.915	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.

**Reporting Owners** 

### Edgar Filing: LIN SANDRA BEACH - Form 4

 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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	b. Date Exercisable and Expiration Date Month/Day/Year)		le and int 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		

# **Reporting Owners**

**Reporting Owner Name / Address** 

LIN SANDRA BEACH POLYONE CENTER

33587 WALKER ROAD AVON LAKE, OH 44012

Signatures
By: Lisa K. Kunkle, Power of Attorney for Sandra

By: Lisa K. Kunkle, Power of Attorney for Sandr Beach Lin

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Director

Х

\*\* 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

(1) Includes 53 shares acquired on October 5, 2017 pursuant to a dividend reinvestment feature of the PolyOne Corporation Deferred Compensation Plan for Non-Employee Directors.

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.

01/02/2018

Date