| SEC Form 4 | |
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Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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| STATEMENT OF CHANGES IN BENEFICIAL | OMB Number: 3235-02 Estimated average burden | | | |
|--|---|------------------------|----------|--|
| Filed pursuant to Section 16(a) of the Securities Exchange A or Section 30(h) of the Investment Company Act of 19 | | hours per response: | 0.5 | |
| 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of R | Reporting Person(s) to | o Issuer | |

| 1. Name and Address of Reporting Person [*] Mell Scott A | | | | 2. Issuer Name and Ti TRIMAS COR | | ig Symbol | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---------|-----------|-------------|--|----------------|---|--|--|------------------------------|-------------------------|--|--|
| (Last) | (First) | (Middle | | 3. Date of Earliest Tran 05/21/2024 | | th/Day/Year) | х | Director Officer (give title below) Chief Fina: | | Owner (specify /) | | |
| SUITE 200 | | | | 4. If Amendment, Date | of Original Fi | led (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Grou | p Filing (Check | Applicable | | |
| (Street) BLOOMFIELD | MI | 48304 | • | | | | X | Form filed by On Form filed by Mo Person | 1 0 | | | |
| HILLS (City) | (State) | (Zip) | | Rule 10b5-1(c | :) Transa | ction Indication | <u>.</u> | | | | | |
| | (State) | (Zip) | | | | insaction was made pursuant to litions of Rule 10b5-1(c). See Ir | | | ten plan that is int | ended to | | |
| | Tab | ole I - N | lon-Derivat | ive Securities Ac | quired, Di | isposed of, or Benef | icially | Owned | | | | |
| | | | | | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indired | | |

| | Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) Disposed Of (D) (Instr. | | r. 3, 4 and 5) | Securities Beneficially Owned Following Reported | (D) or Indirect | of Indirect Beneficial Ownership (Instr. 4) | | |
|--------------|------------------------------------|---|--|-----|----------------|---|---------------------------------|--|---|----------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 05/21/2024 | | S | | 1,500 | D | \$ 27.295 ⁽¹⁾ | 31,923 | D | |
| - | - In La III - De vite en Alterna d | | | Die | | | | N | | |

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Ex | | 6. Date Exerc Expiration Da (Month/Day/Y | d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|-------|-----|--|---|-------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$27.255 to \$27.304 inclusive. The reporting person undertakes to provide to TriMas Corporation, any security holder of TriMas Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

Remarks:

| /s/ Jodi F. Robin, as attorney- | 0 |
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| in-fact | <u>U</u> . |

05/23/2024

** Signature of Reporting Person Date

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.