FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Sherbin Joshua A							2. Issuer Name and Ticker or Trading Symbol TRIMAS CORP [TRS]									(Ched	k all app	olicable)			ssuer Owner (specify
(Last) (First) (Middle) 39400 WOODWARD AVENUE SUITE 130							3. Date of Earliest Transaction (Month/Day/Year) 03/01/2015									X Office (give tide Office (specify below) Vice President & Secretary					
(Street) BLOOMFIELD HILLS MI 48304 (City) (State) (Zip)					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State	<u> </u>		on-Deriv	ative	Sec	uritie	s Ac	auirea	d. Di	sposed o	f. or	Ben	efic	ially	Owne	ed e			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					tion	on 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			A) or	r 5. Amor Securiti Benefic Owned		unt of les ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount	(A)	or	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common Stock					03/01/2	03/01/2015				A		1,245 ⁽¹⁾	Ţ.	A	\$0		53,813				See Footnote ⁽²⁾
Common Stock 03					03/01/2	03/01/2015				A		10,024(3)	,	A	\$0		63,837				See Footnote ⁽²⁾
Common Stock 03/01					03/01/2	2015				A		6,327(4)	,	A \$0		0	70,164		I		See Footnote ⁽²⁾
Common Stock					03/01/2015					F		4,264 ⁽⁵⁾]	D \$29.96		.96	65,900		I		See Footnote ⁽²⁾
			Та	ble II -								osed of,					wned				
Derivative Security (Instr. 3)	tive Conversion Date ty or Exercise (Month/Day/Year) if any			med on Date,	4. Transa Code 8)	Transaction Of Code (Instr. 8) Se Ac (AC Discording of Of Code (Instr. 8)		rative rities pired r osed)	6. Date Exerc Expiration D (Month/Day/\(\frac{1}{2}\)		cisable and	7. Tit Amo Secu Unde Deriv Secu and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amou or Numb of Title Share				9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Restricted stock units granted March 1, 2015 under the 2011 Omnibus Incentive Compensation Plan ("2011 Plan"), restrictions lapse on March 1, 2016.
- 2. Through the Joshua A. Sherbin Revocable Trust under the agreement dated February 21, 2013, as amended.
- 3. Restricted stock units granted March 1, 2015 under the 2011 Plan, restrictions lapse as to one-third of the number of shares on each anniversary date of the grant.
- 4. Shares of common stock granted in settlement of performance stock units granted March 1, 2012 under the 2006 Long Term Equity Incentive Plan, payable only in shares of common stock, based on specified performance goals achieved at December 31, 2014.
- 5. Shares used to satisfy tax withholding obligations.

Remarks:

/s/ Paula Reno attorney-in-fact 03/03/2015

** 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.