Edgar Filing: TRIMAS CORP - Form 4

| TRIMAS COL | RP | | | | | | | | | | |
|---|--|---|-------------------|---|--|----------------------------|-----------|--|--|--|--|
| Form 4 | | | | | | | | | | | |
| November 13, | , 2008 | | | | | | | | | | |
| FORM | UNITEDS | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | | 9PROVAL 3235-0287 | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b). | Filed purs Filed purs Section 17(a | | | | | | | | | January 31 Expires: 200 Estimated average burden hours per response 0. | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| Zalupski Robert J Sym | | | | Name and ' | | Fradin | g | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Lost) | (First) (M | iddla) | TRIMAS CORP [TRS] | | | | | (Check all applicable) | | | |
| (Mor | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/12/2008 | | | | Director 10% Owner Officer (give title Other (specify below) below) Vice President & Treasurer | | | |
| (Street) 4. | | | | dment, Dat | e Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| BLOOMFIEI | LD HILLS, MI 4 | 8304 | Filed(Mont | h/Day/Year) | | | | Applicable Line) _X_ Form filed by Form filed by I Person | One Reporting Po More than One Ro | | |
| (City) | (State) (| Zip) | Table | I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Executio any | | 3. Transactio Code (Instr. 8) Code V | 4. Securi nAcquired Disposed (Instr. 3, | ties l (A) c l of (D | or)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | • | |
| Common Stock | 11/12/2008 | | | P | 2,500 | A | \$ 1.9 | 17,500 | D <u>(1)</u> | | |

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|---|---|---------------------------------------|---|---------------------|--------------------|-----------------------|---|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|----------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Zalupski Robert J 39400 WOODWARD AVENUE SUITE 130 BLOOMFIELD HILLS, MI 48304 | | | Vice President & Treasurer | | | | | |
| Signatures | | | | | | | | |
| /s/ Paula Reno attorney-in-fact | 11/13/20 | 08 | | | | | | |

**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).
- (1) By Robert J. Zalupski and Susan S. Zalupski JTWROS

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.