## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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

											прапу же								
1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol TRIMAS CORP [ TRS ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Valenti Samuel III						Time Sold [ 110 ]								:	X Director		10%	Owner	
(Last) (First) (Middle)														_  :	X Offici	er (give title w)	Othe belo	er (specify w)	
39400 WOODWARD AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 08/18/2010								Chairman					
					100/	00/10/2010													
SUITE 100																			
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
BLOOM	FIELD ]	ELD MI		48304											X Forn	Form filed by One Reporting Person			
HILLS					_										Forn Pers		re than One R	eporting	
(City)	(	State)	(Zip)																
		Tab	le I - No	on-Deriv	ative/	Sec	uritie	s Ac	quired	, Dis	sposed o	f, or E	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,		3. Transaction Code (Instr. 8)  4. Securities A Disposed Of (						Secur Benet	icially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or P	ice	Trans	action(s) 3 and 4)		(1130.4)	
Common Stock 08/18/20					2010	010		S		42,000	D \$13.		13.71	(1) 1	68,000	D			
Common Stock 08/19/20				2010	010		S		2,000	D \$13.		13.69	(2) 1	66,000	D				
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)	rative Conversion Date Execution D or Exercise (Month/Day/Year) if any			on Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		te Amount of Securities Underlying Derivative Security (Ir and 4)		nt of ties lying tive ty (Ins	r. 3	. Price of Perivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Num of Shar	oer					

## 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 \$13.50 to \$14.02, 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 range set forth in this Footnote.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$13.64 to \$13.76, 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 range set forth in this Footnote.

/s/ Paula Reno attorney-in-fact 08/20/2010

\*\* Signature of Reporting Person

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.