FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPR	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	houre por roeponeo:	0.5							

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

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1. Name and Address of Reporting Person* Zalupski Robert J							2. Issuer Name and Ticker or Trading Symbol TRIMAS CORP [TRS]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owner			Owner		
(Last) (First) (Middle) 39400 WOODWARD AVENUE SUITE 130							3. Date of Earliest Transaction (Month/Day/Year) 02/28/2012									X Officer (give title Other (specify below) Vice President & Treasurer					
(Street) BLOOMFIELD HILLS MI 48304 (City) (State) (Zip)						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Tabl	e I - No	on-Deriv	/ative	Se	curit	ies Ac	quirec	d, Di	sposed o	f, or	Ben	efici	ally Owi	ned				
Date					2. Transa Date (Month/D	ay/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				d 5) Secu Bend Own	nount of irities eficially ed Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	(A) (D)	or	Price	Tran	saction(s) r. 3 and 4)		(111511.4)		
Common	Stock				02/28/	2012	Ť			S		3,000])	\$25	.1	27,813	D ⁽³⁾			
Common	Stock				02/28/	2012				S		3,000])	\$25.	.09					
Common	Stock				02/28/	2012				S		3,000])	\$25.2	22(1)	21,813	D ⁽³⁾			
Common	Stock				02/28/	2012				S		3,000])	\$24.7	^{79⁽²⁾}	9 ⁽²⁾ 18,813 D ⁽³⁾				
			Та	ble II -								osed of, convertib					d				
1. Title of Derivative Security (Instr. 3)	2. Conversi or Exerci Price of Derivativ Security	e of (Month/Day/Year) if any (Month/Day)		on Date, Transact Code (In 8)					6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		tte ear)	Amount of Securities Underlying Derivative Security (Ins and 4)		nstr. 3 nount mber	8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			

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 \$25.22 to \$25.23 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.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$24.79 to \$24.81 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 (2) to this Form 4.
- 3. By Robert J. Zalupski and Susan S. Zalupski JTWROS

/s/ Paula Reno attorney-in-fact 03/01/2012

** 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.