Г

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB Number: 3235-0287										
Estimated average burden										
hours per response.	0.5									

1. Name and Address of Reporting Person [*] Zalupski Robert J			2. Issuer Name and Ticker or Trading Symbol <u>TRIMAS CORP</u> [TRS]		ionship of Reporting Persor all applicable) Director Officer (give title	10% Owner Other (specify
(Last) 39400 WOODW SUITE 130	(First) ARD AVENUE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/14/2013		below) Vice President & Tr	below) reasurer
(Street) BLOOMFIELD HILLS	MI	48304	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line) X	dual or Joint/Group Filing (C Form filed by One Reporti Form filed by More than C Person	ing Person
(City)	(State)	(Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities / Disposed Of (5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	05/14/2013		М		11,110	Α	\$20	47,288	D ⁽¹⁾	
Common Stock	05/14/2013		S		11,110	D	\$31.7 ⁽²⁾	36,178	D ⁽¹⁾	

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)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (Right to buy)	\$20	05/14/2013		М			11,110 ⁽³⁾	02/01/2011	02/01/2014	Common Stock	11,110	\$0	0	D ⁽¹⁾	

Explanation of Responses:

1. By Robert J. Zalupski and Susan S. Zalupski JTWROS

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$31.68 to \$31.77 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. Option to purchase shares of common stock of the Company granted February 1, 2004 under the TriMas Corporation 2002 Long Term Equity Incentive Plan, 80% of the shares subject to this Option vested in three equal annual installments on each of February 1, 2005, February 1, 2006 and February 1, 2007; the remaining 20% of the shares subject to this Option vested February 1, 2011.

Remarks:

/s/ Paula Reno attorney-in-fact 05/16/2013

** 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.