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POLYONE Form 4 April 03, 200												
FORN Check th if no long subject to Section 1 Form 4 o Form 5	is box ger STATEM 6. r	Washington, D.C. 20549					NERSHIP OF	OMB Number: Expires: Estimated	mber: 3235-0287 pires: January 31, 2005 imated average den hours per			
obligation may cont <i>See</i> Instru 1(b). (Print or Type F	ns Section 17(a inue. action	a) of the Pu	ublic Uti		ing Com	pany	Act o	f 1935 or Section	on			
EMBRY WAYNE R Symbol				Name and '		Fradin	g	 Relationship of Reporting Person(s) to Issuer (Check all applicable) 				
				f Earliest Transaction Day/Year) 007				X_ Director 10% Owner Officer (give title Other (specify below) below)				
				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
AVON LAP	KE, OH 44012							Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common Stock	03/30/2007			А	2,030	A	\$0	12,577	D			
Common Stock								32,764	Ι	Deferred Comp Plan		

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.

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title and Amount of Underlying Securities (Instr. 3 and	unt of rlying rities	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address

10% Owner Officer Other Director EMBRY WAYNE R POLYONE CENTER Х 33587 WALKER ROAD AVON LAKE, OH 44012 Signatures

By: Wendy C. Shiba Power of Attorney For: Wayne R. Embry

**Signature of Reporting Person

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).

Relationships

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.

04/03/2007

Date