

TRINSEO S.A. Reported by MAXEY CATHERINE C.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/03/15 for the Period Ending 02/27/15

Address 1000 CHESTERBROOK BOULEVARD

SUITE 3000

BERWYN, PA 19312

Telephone 610-240-3200

CIK 0001519061

Symbol TSE

SIC Code 2821 - Plastics Materials, Synthetic Resins, and Nonvulcanizable Elastomers

Fiscal Year 12/31





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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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

1. Name and Address of Reporting Person *				2	2. Issuer Name and Ticker or Trading Symbol 5							ng Syml			nship of I applicab		Person(s)	to Issuer
Maxey Catherine C.				T	Trinseo S.A. [TSE]													
(Last)	•					3. Date of Earliest Transaction (MM/DD/YYYY)							;	Director 10% Owner S Officer (give title below) Other (specify below)				
C/O TRINSEO S.A., 1000					2/27/2015									See Remarks				
CHESTERBR SUITE 300	ROOK E	BOULE	EVARI),														
	(Street)											ed		6. Individual or Joint/Group Filing (Check Applicable Line)				
BERWYN, PA	A 19312																	
(City) (State) (Zip)													X	_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table l	I - Non-I	Deriv	vativ	e Securi	ities	s Acqu	ıir	ed, Di	spo	sed of,	or Ben	eficially	Owned			
1.Title of Security (Instr. 3)				2. Tr Date		Deemed Execution Date, if	Co	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) Disposed of ((Instr. 3, 4 an		or F	Following	owing Reported Transaction(s) r. 3 and 4) C G G G G G G G G G G G G			Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
					any			Code	V	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Ordinary Shares 2/				2/27	/27/2015			A		4847 (1)	A	\$0.00	4847			D		
Tabl	le II - Dei	rivative	Securitio	es Be	enefi	cially O	wne	ed (<i>e.</i> ¿	g.,	, puts,	cal	ls, war	rants, o	options,	convert	ible secur	rities)	•
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise of ative		4. Trans Code (Instr 8)	s. D s S r. A D	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and Am Securities Under Derivative Secu (Instr. 3 and 4)		ing	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial	
				Code	e V	(A)	(D)	Date Exercise	able	Expira e Date	ation	Title	Amour Numbe Shares			Transaction (s) (Instr. 4)	4)	
Option to Purchase Ordinary Shares	\$18.14	2/27/2015		A		11404		(2))	2/27/2	2024	Ordinar Shares	y 11	404	\$0.00	11404	D	

Explanation of Responses:

- (1) Represents ordinary shares issuable pursuant to a restricted stock award that will vest in full on the third anniversary of the grant date.
- (2) The option vests in three equal installments beginning on February 27, 2016.

Remarks:

VP - Public Affairs, Sustainability and Environment, Health and Safety

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Maxey Catherine C. C/O TRINSEO S.A. 1000 CHESTERBROOK BOULEVARD, SUITE 300			See Remarks			

BERWYN, PA 19312		

Signatures

Suzanne Kersten, as attorney-in-fact 3/3/2015 Date

** 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 control number.