FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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* PATIENT WILLIAM F						2. Issuer Name and Ticker or Trading Symbol POLYONE CORP [POL]									Check a		licable)	g Person	Person(s) to Issuer 10% Owner	
	POLYONE CENTER				3. Date of Earliest Transaction (Month/Day/Year) 06/30/2005										Officer (give title below)			Other (specify below)		
33587 WALKER ROAD (Street) AVON LAKE OH 44012					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					
(City) (State) (Zip)																r 613	OII			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				2. Transa Date (Month/Da		Exec if any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Secur Benef		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Price	, т	ransa	ection(s) 3 and 4)			(msu. 4)
Common Stock 06/30/					2005		A		1,889		A	\$6.615		14,609		D				
Common Stock																	200	I		by Spouse's Trust
Common Stock															60,275		0,275	I		by Trust
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)	Execution Date, if any		I. Fransactic Code (Ins	on on criter. S	of		6. Date E: Expiratio (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price Derivat Securit (Instr. !	vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Own Forn Direc or In (I) (Ir	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					ode V		<u>,</u>		Date Evercisal		Expiration	Title	or Nun of	nber						

Explanation of Responses:

By: Wendy C. Shiba, Power of

Attorney For: William F.

Patient

07/05/2005

** 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.