FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPR	ROVAL							
OMB Number: 3235-0								
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions I	Reported.	File	ed pursuant to or Section					ities Exchai ompany Act									
Name and Address of Reporting Person* Winemaster Gary S				POWE	2. Issuer Name and Ticker or Trading Symbol POWER SOLUTIONS INTERNATIONAL,							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
				<u> </u>	INC. [PSIX]						X	Office	er (give title		Oth	er (specify		
(Last) (First) (Middle) 201 MITTEL DRIVE				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014						rear)	below) below) See Remarks							
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
WOOD DALE IL 60191											X Form filed by One Reporting Person							
(City) (State) (Zip)					Form filed by More than One Reporting Person							eporting						
		Table	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	d, Di	sposed o	of, or	Benefici	ally C	wne	ed				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securit Benefic		es ially	Form	ership n: Direct	7. Nature of Indirect Beneficial Ownership	
				(Month/Day/	rear)	/ear) 8)		Amou		(A) or (D)	Price	Is	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock													2,892		I		By 401(k) Plan	
		Та	ble II - Derivat (e.g., pı	ive Secur uts, calls,									ned					
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. Transaction Code (Instr. 8)	5. Nui of Deriv Secui Acqu (A) or Dispo of (D) (Instr. and 5	ative rities ired osed . 3, 4	Expira (Month ties ed		te Exercisable and ration Date th/Day/Year) Expiration cisable Date		Amount or Number of Shares	Derivative Security (Instr. 5) Beneficial Owned Followin Reporter		Following Reported Transactio	e Owners Form: Direct (I or Indire g (I) (Instr		Beneficial Ownership t (Instr. 4)	

Explanation of Responses:

Remarks:

President, Chief Executive Officer and Chairman of the Board

/s/ Catherine V. Andrews, attorney-in-fact for Gary S. 02/12/2015 Winemaster

** 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.