FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington

AND EXCHANGE COMMISSION	OMB APPROVAL					
, D.C. 20549	OMB Number:	3235-0287				
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П	to Section 16. Form 4 or Form 5 obligations may continue. See
ш	obligations may continue. See
_	Instruction 1(h)

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

Name and Address of Reporting Person* Smith Kristina A.				Nex	Issuer Name and Ticker or Trading Symbol Nexeo Solutions, Inc. [NXEO] Date of Earliest Transaction (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					ner	
(Last)	`	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)							X	Officer below)	(give title See Re	emark	Other (s below)	pecify	
3 WATERWAY SQUARE PLACE, SUITE 1000				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) THE WOODL	ANDS T	X 2	77380											X		•		orting Perso One Repo	
(City)	(S	tate) (Zip)																
		Tab	le I - N	on-Deriv	ative S	Sec	urit	ies Acq	uired, [Disp	osed of	, or Be	enefi	ciall	/ Owned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				y/Year) if an		A. Deemed xecution Date, any lonth/Day/Year)				ities Acquired (d Of (D) (Instr. 3				es For ially (D) Ind		: Direct C	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) (D)	or P	rice	Reported Transact (Instr. 3	d tion(s)		(1134: 4)			
	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. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	or	ount nber res		(Instr. 4)	on(s)		
Deferred Payment Right	(1)	11/17/2016			J			26,341 ⁽¹⁾	(1)		06/30/2021	Commor Stock	284	,825	\$0	284,82	25	I	See Footnote ⁽²⁾

Explanation of Responses:

- 1. On June 9, 2016, Nexeo Holdco, LLC, a Delaware limited liability company (the "Management Company"), received, among other things, 311,166 deferred payment rights as consideration in connection with the closing of the business combination of WL Ross Holding Corp. and Nexeo Solutions Holdings, LLC (the "Business Combination"). In connection with the execution of the Purchase Price Adjustment Confirmation Letter on November 17, 2016, the total consideration payable to the selling equityholders, including the Management Company, was adjusted downward, resulting in a decrease in the total number of deferred payment rights due to the Management Company to 284,825.
- 2. The Reporting Person holds a direct membership interest in the Management Company. The Reporting Person disclaims beneficial ownership of all securities reported except to the extent of such Reporting Person's pecuniary interest therein.

Remarks:

Vice President and Chief Accounting Officer

/s/ Kristina A. Smith, by Michael B. Farnell, Jr., as 11/21/2016 Attorney-in-Fact

** 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 Number.