## Edgar Filing: SYPRIS SOLUTIONS INC - Form 4

SYPRIS SOL Form 4 October 27, 2	LUTIONS INC										
FORM	1									PPROVAL	
	UNITE	D STATES		ITIES A hington,			IGE (	COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to	F CHANGES IN BENEFICIAL OWN					NERSHIP OF	Expires: Estimated a	January 31, 2005 average			
Section 10 Form 4 or								burden hours per			
Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed p <sup>is</sup> Section 1	7(a) of the		ility Hold	ing Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	response n	0.5	
(Print or Type R	esponses)										
Larochelle Paul G S				Name and SOLUTI		-		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(Chec	k an applicable	;)	
101 BULLII	TT LANE, SU	ITE 450	(Month/Da 10/26/20	-				below)	title 10% titleX Oth below) Pres. of Subsid		
	(Street)			ndment, Dat th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by 0		-	
LOUISVILL	LE, KY 40222							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	med on Date, if Day/Year)	Code	on(A) or Dis (D)	posed	of	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	10/26/2009			A	20,000	A	\$ 0 (1)	20,000	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

		of (D) (Instr. 3, 4, and 5)				
	Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares
<b>Reporting Owners</b>						
<b>Reporting Owner Name / Address</b>		t <b>ionships</b> r Other				
Larochelle Paul G 101 BULLITT LANE, SUITE 450 LOUISVILLE, KY 40222		VP and	l Pres. of Su	Ibsidiary		
Signatures						
Andrea J. Luescher by Power of Atte Commission	10/27/2009					
**Signature of Repor	ting Person	Date				

Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Restricted Stock Grant, pursuant to the 2004 Sypris Equity Plan, vesting 30%, 30% and 40%, on the third, fourth and fifth anniversary of

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4.

Code

(Instr. 8)

Execution Date, if

(Month/Day/Year)

5.

of

Derivative

Securities

Acquired

Disposed

(A) or

TransactionNumber

6. Date Exercisable and

**Expiration Date** 

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

Bene

Own

Follo

Repo

Trans

(Insti

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

**Explanation of Responses:** 

the grant date, respectively.

a currently valid OMB number.

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

## Reporting Owners

1. Title of

Security

(Instr. 3)

\*\*

(1)

2.

or Exercise

Derivative

Price of

Security

Derivative Conversion

2