## Edgar Filing: GILL JEFFREY T - Form 4

GILL JEFFR	EY T								
Form 4	2								
April 03, 201									
FORM	<b>4</b> UNITED	STATES	SECUR	RITIES A	ND EX	CHANGE	COMMISSION		PROVAL
		5171125		shington,			commodia	OMB Number:	3235-0287
Check thi if no long	or							Expires:	January 31, 2005
subject to Section 10 Form 4 or	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							
obligation may conti	Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type R	Responses)								
1. Name and Address of Reporting Person <u>*</u> GILL JEFFREY T			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer		
						IC [SYPR]	(Check all applicable)		
(Last) (First) (Middle) 101 BULLITT LN., STE. 450			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2013				X DirectorX 10% Owner X Officer (give title Other (specify below) below)		
			4. If Amendment, Date Original Filed(Month/Day/Year)				President and CEO 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
LOUISVILL	LE, KY 40222						Form filed by M Person	Iore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-E	<b>)</b> erivative	Securities A	cquired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock							2,767,233	D	
Common Stock							23,975	Ι	By Wife
Common Stock							1,918,108.923	I	GFP I, LP

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 (9-02) required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: GILL JEFFREY T - Form 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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and 4
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Options(Right to Buy) $\frac{(2)}{2}$	\$ 3.96	04/01/2013		А	200,000	04/01/2016(3)	04/01/2018	Common Stock

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
GILL JEFFREY T 101 BULLITT LN., STE. 450 LOUISVILLE, KY 40222	Х	Х	President and CEO			
Signatures						
Andrea J. Luescher by Power of Attorney on file with the Commission						
<u>**</u> Signature of	Date					

\*\*Signature of Reporting Person

# **Explanation of Responses:**

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).

Consists of limited partnership interests of GFP I, LP, a Delaware limited partnership. The reporting person, his spouse, and the trusts for (1) the benefit of his three children are limited partners of GFP I, LP and the reporting person is a director, executive officer and 50% shareholder in Gill Family Capital Management, Inc. the general partner of GFP I, LP.

- (2) Options granted pursuant to the 2010 Sypris Omnibus Plan.
- (3) Vesting is 100% on the third anniversary of the grant date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.