Edgar Filing: SYPRIS SOLUTIONS INC - Form 4

| SYPRIS SOI Form 4 | LUTIONS INC | 2 | | | | | | | | | | |
|--|---|----------------------|--|---|--------------------|--------|--|--|--|------------------------|--|--|
| February 27, | 2015 | | | | | | | | | | | |
| FORM | 14 | | | | | | | | | PPROVAL | | |
| | UNITE | D STATES | | ITIES A hington, | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | | |
| Section 16. | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | NERSHIP OF | Expires: January 31 2005 Estimated average burden hours per | | | |
| Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | Filed print filed print filed print filed print file file file file file file file file | 7(a) of the | | ility Hold | ling Com | pany | Act of | ge Act of 1934, f 1935 or Sectio 40 | response n | 0.5 | | |
| (Print or Type F | Responses) | | | | | | | | | | | |
| DAVIS RICHARD L Symbol | | | r Name and Ticker or Trading S SOLUTIONS INC [SYPR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| (Last) (First) (Middle) 3. Date c (Month/I | | | 3. Date of | rate of Earliest Transaction onth/Day/Year) 26/2015 | | | | Director X Officer (give below) | Officer (give title Other (specify | | | |
| | | | | Amendment, Date Original Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| LOUISVILI | LE, KY 40222 | | | | | | | Form filed by M Person | Iore than One Re | eporting | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ties Acc | quired, Disposed of | f, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ear) Executio any | med on Date, if Day/Year) | Code (Instr. 8) | on(A) or Di (D) | spose | d 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 | 02/26/2015 | | | F | 847 | D | \$ 2.56 | 219,066 | 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)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|---|---|---|--|--|---------------------|--------------------|-------|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|-----------------|-----------|-----------------------------|-------|--|--|--|--|
| L O | Director | 10% Owner | Officer | Other | | | | |
| DAVIS RICHARD L 101 BULLITT LN., STE. 450 LOUISVILLE, KY 40222 | | | Senior Vice President | | | | | |
| Signatures | | | | | | | | |
| Andrea J. Luescher by Power of A Commission | 02/27/2015 | | | | | | | |
| <u>**</u> Signature of Re | eporting Person | | | Date | | | | |

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).

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.