Wright Murray H Form 4 January 24, 2019

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

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

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Wright Murray H

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Last)

(First) (Middle) 3. Date of Earliest Transaction

SYNALLOY CORP [SYNL]

(Month/Day/Year)

01/24/2019

\_X\_\_ Director 10% Owner Officer (give title Other (specify

(Check all applicable)

below)

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

4510 COX ROAD, STE 201 (Street)

RICHMOND, VA 23060

(City)	(State)	(Zip) Tab	e I - Non-Derivative Securities Acquired, Disposed of, or	Beneficially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 3, 4 and 5) Beneficially Owned Following Reported (I)	7. Nature of Indirect rm: Beneficial ect (D) Ownership Indirect (Instr. 4)
Common Stock	01/24/2019		A 1,615 A \$ 7,928 D	
Common Stock			77,550 I	Revocable Trust
Common Stock			30,000 I	IRA
Common Stock			4,251 I	Spouse (1)
Common Stock			579 I	Spousal IRA (2)

#### Edgar Filing: Wright Murray H - Form 4

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.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	le and	8. Price of	Ç
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	ınt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									A 4		
									Amount		
						Date	Expiration	T:41	or		
						Exercisable Date	Date	Title	Number		
				C 1 1	(A) (D)				of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Panarting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

Wright Murray H 4510 COX ROAD, STE 201 X RICHMOND, VA 23060

### **Signatures**

Sally M. Cunningham, Power of Attorney for Murray H.
Wright

01/24/2019

\*\*Signature of Reporting 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).
- (1) The reporting person expressly disclaims beneficial ownership of these securities and filing this report shall not be construed as an admission of my benefitial ownership thereof for purposes of Section 16 of the Securities, or otherwise.
- (2) The reporting person expressly disclaims beneficial ownerhsip of these securities and filing this report shall not be construed as an admission of my beneficial ownership thereof for purposes of Section 16 of the Securities Act, or otherwise.

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.

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