FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPI | ROVAL |
|---------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average b | urden |

0.5

hours per response:

| | Check this box if no longer subject to |
|---|--|
| ١ | Section 16. Form 4 or Form 5 |
| J | obligations may continue. See |
| | Instruction 1(b) |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Brinkley John F</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol SYPRIS SOLUTIONS INC [SYPR] | | | | | | | | | | | olicable) | , | Person(s) to Issuer | |
|--|--|--|---|-------|------------------------------|--|---|---------|---------------------------------------|---|--|---------|---|----------------|--|---|--|------------|--|---|
| (Last) (First) (Middle) 46 GULL POINT ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/04/2016 | | | | | | | | | | Offic below | er (give title w) | | her (low) | specify |
| (Street) HILTON HEAD ISLAND (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | Execution [| | n Date, | Code (Inst | | | | | | , 4 and S | | Securities | | ip et ect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | е | Transaction(c) | | | | (IIISU: 4) | | |
| Common Stock ⁽¹⁾ 04/04 | | | | | | 04/04/2016 | | | A | | 6,000 | 6,000 A | | (2 | 2) | 62,798 | | D | | |
| | 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. Deeme Execution if any (Month/Da | Date, | 4. Transa Code (8) | | Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Ex Expiration (Month/Da | 9 | Amount of Securities Underlying Derivative Security (Instr. and 4) | | | ıt r | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form: Direct (or Indir (I) (Inst | D) ect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. Stock granted pursuant to the 2015 Sypris Omnibus Plan and the Directors' Compensation Program thereunder.
- 2. The only consideration for which is service as a Director.

Remarks:

Anthony C. Allen by Power of 04/05/2016 Attorney on file with the Commission

** Signature of Reporting Person

Date

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.