## FORM 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OWNERSHIP** 

•	 <b>.</b>	 	 •	•	٠.	• •	_	_	•	••		-	_
					Wa	ash	ninç	jtoi	n,	D.	C.	20	)5

Washington, D.C. 20049	L
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL	

	OMB APPROVAL									
	3235-0362									
	e burden									
	se: 1.0									
- 1										

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

Form 3 Holdings Reported. Form 4 Transactions Reported.

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

l	nd Address of EFFREY		2. Issuer Name and Ticker or Trading Symbol SYPRIS SOLUTIONS INC [ SYPR ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
I (Last) (Filst) (Milute) I					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014							X Officer (give title Other (specify below)  President and CEO				
(Street) LOUISVILLE KY 40222  (City) (State) (Zip)				4. If Amendm	ent, Date c	of Orig	inal Filed (Month		6. Individual or Joint/Group Filing (Check Applicable Line)  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															
Date [ [ (Month/Day/Year) ]			2A. Deemed Execution Date, if any	3. Transac Code (I		4. Securities Acq (D) (Instr. 3, 4 and	or Disposed Of	Of 5. Amount of Securities Beneficially Owned		6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial					
			(	(Month/Day/Yea				(A) or (D) Price		at end of Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I)	Ownership (Instr. 4)			
							Amount	(D)	Price		Instr. 3	(Instr. 4)	(Instr. 4)			
Common	Stock						Amount	(D)	Price		`	(Instr. 4)	(Instr. 4)			
Common							Amount	(D)	Price	and 4)	902		By Spouse			
	Stock						Amount	(D)	Price	and 4) 2,903,9	902	D	,			
Common	Stock	7	āble II - Deriva (e.g.,					of, or I	3eneficially	2,903,9 23,97 1,918,10	902	D I	By Spouse			

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. Transaction Code (Instr. 8)	5. Number Derivative Securities Acquired or Dispos of (D) (In: 3, 4 and 9	e s (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Options (Right to Buy) <sup>(2)</sup>	\$2.8	04/01/2014		4A	200,000		04/01/2017 <sup>(3)</sup>	04/01/2019	Common Stock	200,000	\$0.00	200,000	D	

## **Explanation of Responses:**

- 1. The amounts reported here in consist of limited partnership interest grants of GFP I, LP, a Delaware limited partnership. The reporting person, his spouse and the trusts for 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 of 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.

Andrea J. Luescher by Power of

Attorney on file with the

Commission

01/28/2015

\*\* 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.