

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

OMB APPROVAL					
OMB Number:	3235-0104				
Estimated average burden					
nours per respons	se 0.5				

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Resp	onses)											
1. Name and Address of Reporting Person* Gayner Susan S		Statemen	2. Date of Event Requiring Statement (Month/Day/Year) 05/05/2016		_	3. Issuer Name and Ticker or Trading Symbol SYNALLOY CORP [SYNL]						
1015 HYDE LA	(First) ANE	(Middle)	03/03/2010				4. Relationship of Issuer	, ,	n(s) to	5. If Amendment, Date Original Filed(Month/Day/Year)		
	(Street)						_X_ Director Officer (give tit	le Other (spe	10% Owner Other (specify		6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person	
RICHMOND,	VA 23229						below)	below)			ed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned									
1.Title of Security (Instr. 4)			2. Amount of Se Beneficially Ow (Instr. 4)			ally Own		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natur (Instr. 5	Nature of Indirect Beneficial Ownership instr. 5)		
Reminder: Report	Person	s who respond the form displa	to the cays a cui	ollection rently va	of info	ormatio IB contr	n contained in		•			
1. Title of Derivati (Instr. 4)		2. an	Date Exercisable d Expiration Date onth/Day/Year)		3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Dire	nership of ative ity: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			ate xercisable	Title Alliot		Amount	or Number of	Security	(D) or Indirect (I) (Instr. 5)			
.		LA	1010130010	Date		Shares			(Instr.	5)		

Reporting Owners

Depositing Owner Name /	Relationships					
Reporting Owner Name / Address	Director	Director 10% Owner Offic		Other		
Gayner Susan S 1015 HYDE LANE RICHMOND, VA 23229	X					

Signatures

Sarah M. Cunningham, Power of Attorney for Susan S. Gayner	05/12/2016
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.