FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

STATEMENT OF CHANGES IN 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 Ty	pe Response	s)															
1. Name and Address of Reporting Person * Cunningham Sarah M				2. Issuer Name and Ticker or Trading Symbol SYNALLOY CORP [SYNL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 4510 COX ROAD, SUITE 201 (Street) GLEN ALLEN, VA 23060				3. Date of Earliest Transaction (Month/Day/Year) 09/07/2016						X Officer (give title below) Other (specify below) VP Corporate Administration							
			4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City		(State)	(Zip)			Ta	ıble I	- Non	-Deri	ivative :	Securities	Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)				if Code (Instr. 8)		4. Securities Acquires (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	D) Beneficially Owned Followin Reported Transaction(s)		following	Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year)			ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /		
Common	n Stock		09/07/2016]	P		4,000		\$ 7.32	11,458			D	
			Table II -					quire	the fo	orm dis	splays a of, or Ben	curre eficia	ently valid	OMB con	spond unle trol numbe		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Da	ite, if	4. Transact Code	ion	5.	ative ities ired (seed)	6. Da	ate Exer Expirationth/Day	on Date	7. T Am Und Sec (Ins 4)	Citle and count of derlying urities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Beneficial Ownership (Instr. 4)

Reporting Owners

		Relationships						
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
٠	Cunningham Sarah M							
	4510 COX ROAD, SUITE 201			VP Corporate Administration				
	GLEN ALLEN, VA 23060							

Signatures

Sarah M. Cunningham	09/07/2016	
**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).

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.