FORM 4

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

OMB APPROVAL
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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 [*] Wright Murray H					2. Issuer Name and Ticker or Trading Symbol SYNALLOY CORP [SYNL]							:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director									
(Last) (First) (Middle) 4510 COX ROAD, STE 201					3. Date of Earliest Transaction (Month/Day/Year) 01/24/2019						-		r (give title belo	ow)	Othe	r (specify b	elow)	-				
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person									
RICHMOND, VA 23060												-	Form filed by More than One Reporting Person									
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
(Instr. 3) Date (Month/Day/Year) at			any	emed ion Date, if n/Day/Year)	Code (Instr			(A) or Di	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)			Beneficial Reported	Amount of Securities Beneficially Owned Following Deported Transaction(s) Instr. 3 and 4)			ership In: Ext (D)	. Nature on direct Beneficial Ownership					
						Code		V	Amount	Amount (A) or (D) I		e				or In (I) (Insti	direct (Instr. 4)				
Common Stock 01/2			01/24	/2019			A			1,615	A	\$ 18.5	75	7,928		D						
Common Stock												,	77,550			I		Revocable Trust				
Common Stock												(30,000			I IR.		RA	A			
Common Stock											4	4,251			I Spo		spouse (ouse (1)				
Common Stock												579			I		Spousal RA ⁽²⁾					
Reminder:	Report on a s	separate line	for each	class of sec	urities l	eneficially	owned	direc	Pe co	ersons wh ntained i	no res	form	are	not requ	ction of inf	spond ur	nless	SEC	1474 (9-0	<u></u>		
				Table II		ative Secur			red,	Disposed	of, or	Benefi	ciall		OMB cont	trol num	ber.					
Derivative Conversion Date Security or Exercise (Month/Day/Year) a		Execution Da			4. Transaction Code (Instr. 8)	of Deri	vative urities uired or oosed O) er. 3,	an (N	Date Exer ad Expirati Month/Day	And Un Sec		tle and ount of erlying rities r. 3 and	8. Price of Derivative Security (Instr. 5)		ye s ally lg lion(s)	Owners Form of Derivati Security Direct (I or Indire (I) (Instr. 4	Bener Owne (Instr D)	direct ficial ership				
								Date Expiration Exercisable Date		ation	Γitle	Amount or Number of Shares										

Reporting Owners

P (0 N /	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Wright Murray H 4510 COX ROAD, STE 201 RICHMOND, VA 23060	X									

Signatures

Sally M. Cunningham, Power of Attorney for Murray H. Wright	01/24/2019	9	9								
-*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.