## 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 * Michtich Amy J				2. Issuer Name and Ticker or Trading Symbol SYNALLOY CORP [SYNL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
(Last) (First) (Middle) 5135 SOUTH EASTSIDE HWY				3. Date of Earliest Transaction (Month/Day/Year) 12/18/2020							Office	r (give title belo	ow)	Other (speci	y belov	v)		
(Street)				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 Form filed by More than One Reporting Person								
ELKTON	N, VA 228	27												ou by More than	one reporting	r Crson		
(City	r)	(State)	(Zip)			Ta	ble I	- Non	-Deri	ivative	Securities	Acqu	iired, Disp	osed of, or I	Beneficially	Owned		
(Instr. 3)			2. Transaction Date (Month/Day/Year)	Exect			Code (Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership of Form:		Beneficial	
			(Month/Day/Year)			ode	V	Amoui	(A) or	Price		Direct (I or Indire (I) (Instr. 4)			Indirect (Instr. 4)			
Common	Stock		12/18/2020				1	A		3,752		\$ 7.99	23,810			D		
			Table II -					1 quire	the fo	orm di sposed	splays a of, or Ben	curre reficia	ently valid	OMB conf	spond unle trol numbe			
1 77'41 . C	I <sub>a</sub>	2 75 4			outs, calls 4.						tible secu			0 D : C	0.37 1	C 10		11.37.
Security	Conversion or Exercise Price of Derivative Security	3. Transactior Date (Month/Day/\)	Execution Da any	te, if Transaction Code Year) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Un Sec	Fitle and nount of derlying purities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form Deriv Secur Direct or Inc	of ative ity: t (D) lirect	Beneficial Ownershij (Instr. 4)		
					Code	v	(A)		Date Exerc	cisable	Expiration Date	n Tit	Amount or Number of Shares					

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Michtich Amy J 5135 SOUTH EASTSIDE HWY ELKTON, VA 22827	X					

#### **Signatures**

Sally M. Cunningham, Power of Attorney for Amy J. Michtich	12/18/2020
**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.