## 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 Type Responses)																	
1. Name and Address of Reporting Person *- Guy Henry L				2. Issuer Name and Ticker or Trading Symbol SYNALLOY CORP [SYNL]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director					
(Last) (First) (Middle) 89 SUMMIT AVENUE, SECOND FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 11/22/2021							-	Officer (give title below)		Other (specify belo	w)		
(Street) SUMMIT, NJ 07901				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint (Group FilingCheck Applicable Line) X. Form field by One Reporting Person Form filed by More than One Reporting Person ired, Disposed of, or Beneficially Owned						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquir													
1.Title of Security (Instr. 3)			2. Transactio (Month/Day/	Year) E			(Instr. 8)		Disposed	4. Securities Acquired (A) or Disposed of (D) Instr. 3, 4 and 5)		1	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	Beneficial
				(d	(Wollan Day Teal)		Code	v	Amount	(A) or (D	) Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock			11/22/202	1			P		20,000	A	\$ 13.85	01	20,000			I	Investment Advisor
Common Stock			11/24/202	1	P		P		55,000	A	\$ 14.52	3	75,000		I	Investment Advisor	
Common Stock			11/26/202	1	Р			4,450	A	\$ 13.95	46	79,450		I	Investment Advisor		
Common Stock			11/29/202	1		P			5,199	A	\$ 13.98	5	84,649		I	Investment Advisor	
Common Stock 11			11/30/202	1	P		P		6,403	A	\$ 13.98	5 9	91,052			I	Investment Advisor
Reminder: Report on a separate	line for each class of	securities beneficially	owned directly or in	ndirectly.													
													f information contained in this fo ently valid OMB control number.	rm are not re	quired to	SI	EC 1474 (9-02)
				Tabl			curities Acquired ls, warrants, optic				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8) Sec Dis		Number of Derivative curities Acquired (A) or sposed of (D) str. 3, 4, and 5)		Expira	6. Date Exercisable and Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative D Security Se (Instr. 5) B	9. Number of Derivative Securities Beneficially Owned	Ownersh Form of	e Ownership	
				Co	ode V		(A)	(D)	Date Exerci		piration T	Γitle	Amount or Number of Shares		Following Reported Transaction (Instr. 4)	Direct (D) or Indirect	) [

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Guy Henry L 89 SUMMIT AVENUE, SECOND FLOOR SUMMIT, NJ 07901	X						

### **Signatures**

Pauline A Sumner, Power of Attorney for Henry L. Guy	12/08/2021		
**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).

#### Remarks

The Reporting Person is an advisor of Pittco Direct Investment I. Pittco Direct Investment I is the direct beneficial owner of the securities. The Reporting Person disclaims beneficial ownership, within the meaning of Section 16 of the Sec

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$ 

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.