FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGE</b>	S IN BENEFICIAL	. OWNERSHIP

l	UNIB APPRO	VAL				
l	OMB Number:	3235-0287				
l	Estimated average burde	n				
l	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).

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

1. Name and Address of Reporting Person*  GILL JEFFREY T				2. Issuer Name <b>and</b> Ticker or Trading Symbol SYPRIS SOLUTIONS INC [ SYPR ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last) (First) (Middle) 101 BULLITT LN., STE. 450					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2011									X	Officer (give title below)  Other (specify below)  President and CEO				
(Street) LOUISV (City)		Y State)	40222 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			action 2A. Deemed Execution Date, if any (Month/Day/Year)		e,   T	Transaction Disposed Of Code (Instr. 5)		ties Acquire Of (D) (Ins	s Acquired (A) or of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							c	Code	·	Amount	(A) o	r Prio	се	Transaction(s) (Instr. 3 and 4)				, ,	
Common Stock													2,709,265		D				
Common Stock													23,975			I	By Wife		
Common Stock														1,918,108.923				GFP I, LP <sup>(1)</sup>	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Cod	nsaction le (Instr.			6. Date Exercisab Expiration Date (Month/Day/Year)				7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	Ownersh Form: Direct (D or Indirect (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)
				Cod	de V	(A)	(D)	Date Exerc	cisable		xpiration ate	Title	Amou or Numb of Sha	er		(Instr. 4)	.o.n( <i>a)</i>		
Options (Right to Buy) <sup>(2)</sup>	\$4.11	04/01/2011		A		200,000		04/01	1/2014 <sup>(3)</sup>	03	3/31/2016	Common Stock	200,0	000 \$0		200,000		D	

## **Explanation of Responses:**

- 1. Consists of limited partnership interests of GFP I, LP, a DE limited partnership. The reporting person, his wife, and the trusts for the benefit of his three children are limited partners of GFP I, LP and the reporting person is a director, executive officer and 50% shareholder in Gill Family Capital Management, Inc. the general partner of GFP I, LP.
- 2. Options granted pursuant to the 2010 Sypris Omnibus Plan.
- 3. Vesting is 100% on the third anniversary of the grant date.

Andrea J. Luescher by Power of Attorney on file with the

Commission

04/04/2011

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.