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ALLEN ANT	THONY C											
Form 4												
March 05, 20	007											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this box				-						January 31,		
if no long subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP OF					Expires: 2005 Estimated average			
Section 1	6.	SECURITIES							burden hours per			
Form 4 or Form 5									response	response 0.5		
obligation	10	^					-	ge Act of 1934,				
may conti	inue. Section) of the In	•	•			f 1935 or Section	n			
<i>See</i> Instru 1(b).	iction	50(II)) of the fit	vestment	Company	y Act	01 194	+0				
(Print or Type R	Responses)											
1. Name and A ALLEN AN	2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer						
			SYPRIS	S SOLUT	IONS IN	C [SY	(PR]	(Chec	k all applicable	a)		
(Last)	(First)	(Middle)	3. Date of	Earliest Ti	ransaction			(Chec	k all applicable	5)		
(Month/I				onth/Day/Year)				Director		Owner		
101 BULLI	ΓΤ LANE, SU	JITE 450	03/01/20	007				XOfficer (give below) VP, Trea	e title Othe below) asurer and Asst	er (specify Sec		
	(Street)		4. If Ame	ndment, Da	ate Original			6. Individual or Jo	oint/Group Filin	1g(Check		
Filed(Me				nth/Day/Year	r)			Applicable Line)				
LOUISVILI	LE, KY 40222	2						_X_ Form filed by C Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative S	Securit	ies Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y		on Date, if		on(A) or Di	sposed	of	Securities	Form: Direct			
(Instr. 3)		any (Month	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Beneficially Owned	(_)	Beneficial Ownership		
		(1.101144	, 2 u j, 1 v u)	(1110111-0)	(11154110),	. uno c	·)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(
Common Stock	03/01/2007			А	14,925	А	\$ 0 (1)	135,556	D			

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

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 control number.

 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/Year)	4. Transactio Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
FB	Director	10% Owner	Officer	Other				
ALLEN ANTHONY C 101 BULLITT LANE, SUITE 450 LOUISVILLE, KY 40222			VP, Treasurer and Asst Sec					
Signatures								

Anthony C. 03/05/2007

Allen

**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). **

Restricted Stock Grant, pursuant to the 2004 Sypris Equity Plan, 8.33% of which vests on each of the third, fifth and seventh anniversaries of the grant date and 18.75% of which vests on the first, second, third and fourth anniversaries of the date on which the (1) Company has achieved certain financial targets. If such financial targets are not achieved within three years of the grant date, these latter shares are forfeited.

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.