FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

GYANI MOHAN S	2. Date of Event Requiring Statement (Month/Day/Year) 01/16/2019 3. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [SNCR]											
(Last) (First) (Middle) 200 CROSSING BLVD.			Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			- 1	5. If Amendment, Date of Original Filed (Month/Day/Year)					
			71	Officer (give title below)	Other (spe below)	cify	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BRIDGEWATER NJ 08807							X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)												
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Inst			(Instr. 4) Conversi or Exerci		e Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivativ Security	ve o	Direct (D) or Indirect (I) (Instr. 5)				
Stock Option (Right to Buy)	01/16/2020	01/16/2026	6	Common Stock	30,000	7.14		D				

Explanation of Responses:

Remarks:

<u>/s/ Mohan Gyani</u> <u>01/22/2019</u>

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).