FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

	OMB Number:	3235-0287								
l	Estimated average burden									
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*						2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Parkinson Robert Sean</u>						SNCR								Director			10% Ow	· I		
() (T) () (AT III)					- [3								X	Officer (below)	give title		Other (specify below)		
(Last) (First) (Middle) 750 ROUTE 202 SOUTH						3. Date of Earliest Transaction (Month/Day/Year)									President International Ops.					
					12	12/18/2007														
SUITE 600					4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6 Inc	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					_ ``	,		outo o	. Origina		(.y, . oa. ,		Line)						
BRIDGEWATER NJ 08807														X Form filed by One Reporting Person						
				-										Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Ta	ble I - Non	-Deriv	vativ	/e Se	curities	s Ac	quired	, Dis	posed c	of, or B	ene	ficially	Owned					
1. Title of S	Security (Ins	tr. 3)		2. Trans	sactio	2A. Deemed Execution Date.			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4					A) or	r 5. Amount of Securities		6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				(Month/Day/Year)				,	Code (Instr.		tr.		1511. 3	, 4 anu 5	Beneficially Owned Following		(D) or Indirect	Indirect		
							(WOITH/Day/Tea							Reported	·	(1) (111	111301.4)			
									Code	V	Amount	(A)	or	Price	Transacti (Instr. 3 a	nd 4)				
Common Stock 12,					8/200	8/2007			A		12,500)(1)	A	\$0	12,	500		D		
			Table II - I												Owned					
			(e.g., p	puts,	, cal	ls, warr	ants	, optio	ns, c	onverti	ble sec	urit	ies)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da if any (Month/Day/Y	Code (Ir			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		!	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	ode	v	(A)		Date Exercisa		Expiration Date	Title	or Nu	nount mber Shares		(Instr. 4)				
Stock Option (Right to	\$33.32	12/18/2007			A		130,000		(2)	1	2/18/2017	Commo Stock	1 13	80,000	\$0	130,00	00	D		

Explanation of Responses:

- 1. The restricted stock shall become vested with respect to 25% of the shares on the 1 year anniversary of the date of grant and with respect to an additional 2.0833% of the aggregate share total each month thereafter.
- 2. Exercisable with respect to 25% of the shares on the 1 year anniversary of the date of grant. Exercisable with respect to an additional 2.0833% of the aggregate option share total each month thereafter.

/s/ Robert Sean Parkinson

12/20/2007

** 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.