FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL           |           |  |  |  |  |  |  |  |  |
|------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:            | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burd | en        |  |  |  |  |  |  |  |  |
| 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

| Name and Address of Reporting Person*     Schuette David   |   |  |        |  | SY  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [ SNCR ] |   |  |   |   |        |   |             |       | Officer (give title Other  |  |   | Issuer Owner r (specify   |  |
|--|---|--|--------|--|---|--|---|--|---|---|--------|---|-------------|-------|--|--|---|---|--|
| (Last) (First) (Middle) 200 CROSSING BLVD.   |   |  |        |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/23/2015 |  |   |  |   |   |        |   |             |       | X Officer (give file Other (specify below)  EVP  |  |   |   |  |
| (Street) BRIDGEWATER NJ 08807  (City) (State) (Zip)  |   |  |        |  | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                 |   |  |   |   |        |   |             |       | 6. Individual or Joint/Group Filing (Check Applicable Line)  X 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. Transac Date (Month/Da   |   |  |        |  |   | Execution Date,  |   |  | Code (  | Transaction Disposed C<br>Code (Instr. 5) |        |   |             |       | nd Sec<br>Ber<br>Ow  | mount of<br>urities<br>eficially<br>ned Following<br>orted | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |        |  |   |  |   |  |   | v   | Amount |   | A) or<br>D) | Price | ͺ   Tra  | nsaction(s)<br>tr. 3 and 4)                                |   | (111501.4)  |  |
| Common Stock12 12/23/2   |   |  |        |  |   |  | 2015  |  | A   |   | 50,000 | (1) A \$0   |             | 00    | 55,309   | D  |   |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |        |  |   |  |   |  |   |   |        |   |             |       |  |  |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | if any | ecution Date,<br>ny C<br>conth/Day/Year) |   |  | saction of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5) |  | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable  Expiration Date |   |        | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. :<br>and 4)  Amount<br>or<br>Number<br>of<br>Title Shares |             | ount  | 8. Price of Derivative Security (Instr. 5)   |  | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4  | Beneficial<br>Ownership<br>(Instr. 4)                             |  |

## Explanation of Responses:

1. Shares of restricted stock granted pursuant to the Company's 2015 Equity Incentive Plan.

## Remarks:

/s/ David Schuette

12/24/2015

\*\* 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.