FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden 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* Prague Ronald				<u>S'</u>	2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC SNCR								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
	SSING BC	irst) DULEVARD	(Middle)		3.1	3. Date of Earliest Transaction (Month/Day/Year) 02/19/2016									Officer (give title below) EVP and Ge		Other (s below) eneral Counsel		pecity
SUITE 800 (Street) BRIDGEWATER NJ 08807				4. 1	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						
(City)	(S	tate)	(Zip)												Person				
		Tal	ole I - No	n-Der	ivativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Be	enefic	ially	Owned				
1. Title of Security (Instr. 3)		Date	Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		4 and 5) Securition Benefici Owned F		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 2016-2018 Performance Shares		02/19/2016		16			A		10,978	(1) A	. \$	\$0.00	50,379			D			
		02/1	19/201	16			A		10,978	(2) A	. 4	0.00 10		,978		D			
			Table II -								osed of, onvertib				Owned				
Derivative Conversion Date E Security or Exercise (Month/Day/Year) if		3A. Deemed Execution I if any (Month/Day	Date, Trans		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5)		ve es d	6. Date Exercisal Expiration Date (Month/Day/Year		of Securities		Derivative Security		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amo or Nun of Sha	nber					
Stock Option (Right to	\$25.81	02/19/2016			A		27,582		02/19/2017	(3)	02/19/2023	Commo	27,	582	\$0.00	27,58	2	D	

Explanation of Responses:

- 1. Shares of restricted stock granted pursuant to the Company's 2015 Equity Incentive Plan. One-third of the shares shall vest on each anniversary of the grant date
- 2. Represents target number of performance shares. The actual number of shares to be issued, which could range from 0 to two times the initial target amount, will depend upon the issuer's revenue, EBITDA and enterprise business during fiscal years 2016, 2017 and 2018. The shares, if any, will be issued on or about February 2019.
- 3. The option shall become exercisable with respect to the first 25 percent of the shares subject to the option when the Reporting Person completes 12 months of continuous service after February 19, 2016. The option shall become exercisable with respect to an additional 1/48th of the shares subject to the option when the Reporting Person completes each month of continuous service thereafter.

Remarks:

/s/ Ronald J. Prague

02/23/2016

** 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.