FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

.C. 20549	
.0. 20040	OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

1. Name and Address of Reporting Person\*

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

2. Issuer Name and Ticker or Trading Symbol

Moore Donnie					STRCIIRONOSS TECHNOLOGIES INC											eck all applic X Directo	•	10% Ov		vner		
(Last)	(F	irst)	(Middle)		_	SNCR ]										Officer below)	Officer (give title below)		Other (s	specify		
,	JGH ALISO		3. Date of Earliest Transaction (Month/Day/Year) 10/12/2016																			
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)										vidual or Joint/Group Filing (Check Applica					
SARASO	OTA FI	Ĺ	43240		_												Form filed by One Reporting Person  Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)													Person						
		Tak	ole I - No	n-Deri	vativ	e S	ecurit	ties A	cqı	uired,	Dis	posed o	f, o	r Ben	eficial	y Owned	l					
			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or . 3, 4 and		es ally Following	Form (D) o	: Direct r Indirect str. 4)	of Indirect t Beneficial Ownership			
										Code	v	Amount		(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
Common	Stock			10/1	2/201	6				A		2,000		A	\$15.8	9 25	,592		D			
Common	mmon Stock			10/1	10/12/2016					A		3,500		A	\$22.5	5 29	,092		D			
Common	Stock			10/1	2/201	6				S		5,500(	1)	D	\$39.3	8 23	,592	D				
		•	Table II -									osed of, convertil				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		n of E		Ex	. Date Exercisa xpiration Date Month/Day/Year			Am Sec Und Dei	Fitle and nount of curities derlying rivative str. 3 and	Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s dlly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Da: Ex	ite ercisable		Expiration Date	Titl		Amount or Number of Shares							
Stock Option (Right to Buy)	\$15.89	10/12/2016			M			2,000	01/	/05/2011 <sup>(</sup>	(2)	01/05/2017		mmon tock	2,000	\$0.00	0		D			
Stock Option (Right to	\$22.5	10/12/2016			M			3,500	05/	/01/2008 <sup>(</sup>	(3)	05/01/2017		mmon tock	3,500	\$0.00	31,500	0	D			

## **Explanation of Responses:**

- 1. All of the sales reported on this Form were effected pursuant to an approved Rule 10b5-1 trading plan
- 2. The option shall become exercisable with respect to 1/12th of the shares subject to the option when the Reporting Person completes each month of continuous service after 1/6/2009.
- 3. The option shall become exercisable with respect to one-fourth of the shares subject to the option when the Reporting Person completes each month of continuous service after 5/1/2007.

## Remarks:

Purchase)

/s/ Donnie Moore

10/13/2016

\*\* 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.