FORM 4

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

Washington, D.C. 20549

washington, D.C. 20549

OMB APP	ROVAL
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0.5

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>HOFFMAN CHARLES E</u>					<u>S'</u>	2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [ SNCR ]								elationship ceck all applic	•		n(s) to Issu	
(Last) 8251 PA	,	irst) RIVE, UNIT 3E	(Middle)	3.	3. Date of Earliest Transaction (Month/Day/Year) 10/22/2014								Officer below)	(give title	Other (s below)		pecify	
(Street)	DUIS MO 63105					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicatione)     X Form filed by One Reporting Person     Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)											Person				
		Tal	ble I - No	n-Der	ivativ	e Se	ecuri	ties Ac	quired	, Dis	sposed o	f, or Ber	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date						ar) E	xecuti f any	A. Deemed xecution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8)				Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of ndirect seneficial Ownership
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			nstr. 4)
Common Stock 10/22					2/2014	2014			М		10,000	A	\$27.92	2 31,	591	D		
Common Stock 10/22/					2/2014	2014					10,000	A	\$10.04	41,	41,591		D	
Common Stock 10/22/				2/2014	2014			S		20,000	D	\$46.35 <sup>0</sup>	1) 21,	,591		D		
			Table II								osed of, convertib			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	ed Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercis Expiration Date (Month/Day/Yea		sable and	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e (	Downership Form: Direct (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$10.04	10/22/2014			M			10,000	02/06/200	09 <sup>(2)</sup>	01/06/2016	Common Stock	10,000	\$0.00	0		D	
Stock Option	\$27.92	10/22/2014			M			10,000	02/08/200	08 <sup>(3)</sup>	01/06/2015	Common	10.000	\$0.00	0		D	

## **Explanation of Responses:**

- 1. The weighted average sales price is reported as stock sales were aggregated for reporting purposes. The per share transaction price ranged from \$45.89 to \$46.77. The reporting person will provide, upon request from an appropriate party, the per share sales volume and prices.
- 2. The option shall become exercisable with respect to 1/12th of the shares 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 1/12th of the shares to the option when the Reporting Person completes each month of continuous service after 1/8/2008.

## Remarks:

Buy)

 $All of the sales \ reported \ on \ this \ Form \ were \ effected \ pursuant \ to \ an \ approved \ Rule \ 10b5-1 \ trading \ plan.$ 

<u>/s/ Charles Hoffman</u> <u>10/24/2014</u>

\*\* 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.