## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C.	20549
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OMB APPRO	OVAL						
OMB Number:	3235-0287						
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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).

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*  McCormick James M  (Last) (First) (Middle)  VERTEK CORPORATION  463 MOUNTAIN VIEW DRIVE						2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [ SNCR ]  3. Date of Earliest Transaction (Month/Day/Year) 12/02/2014								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director					
(Street) COLCHI	- 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person									
		Tabl	le I - I	Non-Deriv	ative	Secu	uritie	s Ad	quir	ed, D	isposed o	f, or E	Benefici	ally C	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y						2A. Deemed Execution Date, if any (Month/Day/Year		te,	3. Transaction Code (Instr. 8) 4. Securities Disposed Of				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3		ion(s)			(11341. 4)
Common Stock 12/02/201					)14	.4			S		50,000	D	\$41.08	(1)	2,438,111			D	
Common Stock															870,0	000(2)		I	by Vertek Corporation
Common Stock															368,214(3)			I	BY GRAT
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	ivative urity or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		Transa Code (		5. Num of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		Deriv Secu	8. Price of Derivative Security (Instr. 5) Beneficia Owned Followin Reporter Transact (Instr. 4)		e s ally g	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)		

## **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 \$40.67 to \$41.56. The reporting person will provide, upon request from an appropriate party, the per share sales volume and prices.
- 2. The Reporting Person is the Chief Executive Officer and sole stockholder of Vertek Corporation. The Reporting Person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in the report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 for any other purpose.
- 3. These shares were previously reported as directly beneficially owned but were contributed to a grantor retained annuity trust on May 13, 2010.

## Remarks:

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

12/04/2014 /s/ James M. McCormick

\*\* 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.