FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
asımıgtori,	D.O.	200-0	

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

RILEY BRYANT R

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

By B. Riley Securities, Inc.(1)(2)(3)

> 11. Nature of Indirect Beneficial Ownership (Instr. 4)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	ectior	1 30(h)	of the	nvestm	ent Co	mpany Act	of 1940								
1. Name and Address of Reporting Person* B. Riley Financial, Inc.			SY	2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC SNCR 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Director Director Director Director Director Director Director																
(Last) (First) (Middle)				'									Officer (give title Other (specify below) below)							
I ` '				3. Da	Date of Earliest Transaction (Month/Day/Year)									,			,			
SUITE 8		riter beve,			09/3	30/20)21													
								_						+						
(Street)					4. If a	Amer	ndment,	Date	of Origir	nal File	ed (Month/Da	ay/Year)	6. Lin		r Joint/Gro	oup Fili	ing (Chec	k Applicable	
LOS CA 90025															filed by C		-			
ANGELES														X Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Table	1 - No	n-Deriva	ative :	Sec	urities	s Acc	quired	l, Dis	sposed o	f, or E	Bene	ficia	ally Own	ed				
1. Title of	Security (Ins			2. Transac		2A.	Deeme	d t	3.		4. Securitie	s Acqui	ired (A	A) or	5. Amou	nt of		vnership	7. Nature o	
				Date (Month/Da	y/Year)	Execution Date, if any (Month/Day/Year)				Disposed Of (D) (Instr. 3 5)		ıstr. 3,	4 and	d Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial		
						(1410	пппрау	i i cai j	0)			(A) or Price			Reporte	d	""	Su. 4)	Ownership (Instr. 4)	
									Code	V	Amount	(D)	" P	rice	(Instr. 3	and 4)				
																			By B.	
Common	Stock														11,53	88,462		I	Riley Securitie	
																			Inc. ⁽¹⁾⁽²⁾⁽³	
		Ta	ble II -	- Derivat	ive S	ecui	rities	Acai	ıired.	Disp	osed of,	or Be	enefi	cial	lv Owne		<u> </u>		<u> </u>	
											convertik									
1. Title of Derivative	2. Conversion	3. Transaction Date		. Deemed 4. ecution Date, Tra		actior		umber	6. Date Expira		cisable and ate	7. Titl			8. Price of Derivative	9. Number of derivative		10. Owners	11. Nat	
Security or Exercise (Month/Day/Year) if any			if any	n/Day/Year)	Code 8)					(Month/Day/Year)		Secui			Security (Instr. 5)	Securitie Beneficia	s	Form: Direct (I	Benefic	
		`		_		Acquired (A) or					Derivative Security (Inst		str.	. ,	Owned Following		or Indirect (I) (Instr. 4)	ct (Instr. 4		
							Disp of (E	osed))				3 and	4)			Reported Transact				
							(Inst	r. 3, 4 5)								(Instr. 4)				
													Amo	unt						
									Date		Expiration		or Num of	ber						
					Code	V	(A)	(D)	Exerci	sable	Date	Title	Shar	es						
		f Reporting Person	k																	
B. Rile	<u>y Financ</u>	<u>ial, Inc.</u>																		
						-														
(Last)	ANTEA MO	(First)	(M	iddle)																
l		NICA BLVD,																		
SUITE 8						_														
(Street)																				
LOS AN	IGELES	CA	90	0025																
(City)		(State)	(Zi	p)		-														
1. Name a	nd Address o	f Reporting Person	k																	
	<u>y Securit</u>																			
(Last)		(First)	(M	iddle)																
11100 S	ANTA MO	NICA BLVD,																		
SUITE 8	800																			
(Street)						- [
LOS AN	IGELES	CA	90	0025		_														
(City)		(State)	(Zi	p)																
1 Name a	nd Addross s	f Danorting Darson	*																	

(Last)	(First)	(Middle)						
11100 SANTA MONICA BLVD,								
SUITE 800								
(Street)								
LOS ANGELES	CA	90025						
(City)	(State)	(7:n)						
(City)	(State)	(Zip)						

Explanation of Responses:

- 1. This Form 4 is being filed jointly by B. Riley Financial, Inc., a Delaware corporation ("BRF"), B. Riley Securities, Inc., a Delaware corporation ("BRS"), and Bryant R. Riley.
- 2. BRF is the parent company of BRS. As a result, BRF may be deemed to indirectly beneficially own the shares held by BRS.
- 3. Bryant R. Riley is the Co-Chief Executive Officer and Chairman of the Board of Directors of BRF. As a result, Bryant R. Riley may be deemed to indirectly beneficially own the shares of Common Stock directly held by BRS. Each of BRF, BRS, and Bryant R. Riley disclaims beneficial ownership of the outstanding shares of Common Stock reported herein, except to the extent of its/his respective pecuniary interest therein.

Remarks:

As of September 30, 2021, by virtue of the removal of any trading and voting power authority in any capacity of BRF, B. Riley Capital Management, LLC, a New York limited liability company, a registered investment advisor ("BRCM"), and Bryant R. Riley over the assets of BRC Partners Opportunity Fund, LP, a Delaware limited partnership ("BRPLP"), BRF, BRCM and Bryant R. Riley no longer may be deemed to beneficially own the shares held by BRPLP.

B. Riley Financial, Inc., by: /s/

Bryant R. Riley, Co-Chief 10/29/2021

Executive Officer

B. Riley Securities, Inc., by:

/s/ Andrew Moore, Chief 10/29/2021

Executive Officer

Bryant R. Riley, by: /s/ Bryant

10/29/2021 <u>10/29/2021</u>

R. Riley

** Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$

- * 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.