FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** OMB Number:

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)

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*  Garcia Robert  (Last) (First) (Middle)  750 ROUTE 202  SIXTH FLOOR					2. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [ SNCR ]  3. Date of Earliest Transaction (Month/Day/Year) 09/17/2008  4. If Amendment, Date of Original Filed (Month/Day/Year)							[ (Che	S. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below) below)  Executive Vice President  6. Individual or Joint/Group Filing (Check Applicable)				
(Street) BRIDGEWATER NJ 08807  (City) (State) (Zip)												- 1	Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Trans				2. Transa	ection	2A. Deemed Execution Date if any (Month/Day/Yea	3. Tran	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			r 5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Cod	v	Amou	unt	(A) or (D)	Price	Reported Transact (Instr. 3 a	tion(s)		(Instr. 4)	
Common Stock				09/17/2008			М		1,	1,060		\$1.84	59,	,093	D		
Common Stock				09/17/2008			S		1	100		\$10.2	8 58,	,993	D		
Common Stock				09/17/2008			S		1	100		\$10.3	3 58,	,893	D		
Common Stock				09/17/2008			S		1	100		\$10.3	9 58,	,793	D		
Common Stock				09/17/2008			S		1	100		\$10.4	3 58,	,693	D		
Common Stock				09/17/2008			S	$\perp$	1	100		\$10.4	4 58,	,593	D		
Common Stock				09/17/2008			S		1	100 I		\$10.4	58,	,493	D		
Common Stock				09/17	/2008		S		1	100		\$10.5	4 58,	,393	D		
Common Stock				09/17	/2008		S		1	160		\$10.6	5 58,	,233	D		
Common Stock				09/17	/2008		S		1	00	D	\$10.7	58,133		D		
Common Stock 09/17/2					/2008		S		1	00	00 D \$		7 58,	,033	D		
		٦				curities Acc							Owned				
1. Title of Derivative Security (Instr. 3)	of 2. 3. Transaction Execution Date Execution Date (Month/Day/Year) if any		d 4 Date, T	ransaction	5. Number 6. I			Date Exercisable and opiration Date conth/Day/Year)			security 4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		

## **Explanation of Responses:**

\$1.84

1. 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 January 3, 2005. 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.

Date

Exercisable

01/03/2006<sup>(1)</sup>

Expiration

04/12/2015

Title

Common

Stock

Date

## Remarks:

Stock Option

Buy)

(Right to

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

/s/ Robert Garcia

09/19/2008

38,414

D

\*\* Signature of Reporting Person

Amount or Number

Shares

1,060

\$0.00

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).

09/17/2008

\*\* 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.

Code

M

(A) (D)

1.060

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.