FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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>Bernstein Martin Francis</u>			2. Date of E Requiring S (Month/Day 07/12/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [SNCR]				
(Last) 200 CROS (Street) BRIDGEW (City)	(First) SING BLVD. /ATER NJ (State)	(Middle) 08807 (Zip)	-		4. Relationship of Reporti Issuer (Check all applicable) X Director Officer (give title below)	10% C	Fil Owner 6. (Specify	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person	
		Та	ıble I - Non	-Derivati	ve Securities Bene	ficially O	wned		
1. Title of Security (Instr. 4)				E	2. Amount of Securities Beneficially Owned (Instr 4)	3. Own Form: I (D) or I (I) (Inst	Direct Own	. Nature of Indirect Beneficial Ownership (Instr. 5)	
					Securities Benefic nts, options, conve				
, ,			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Underlying Derivative (Instr. 4)		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr.
					Amount or Number	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Martin Bernstein 07/21/2021

** 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 5 (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.