FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

heck this box if no longer subject to
ection 16. Form 4 or Form 5
bligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

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*  Institutional Venture Partners XII LP  (Last) (First) (Middle)				<u>SY</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol SYNCHRONOSS TECHNOLOGIES INC [ SNCR ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)      Director X 10% Owner      Officer (give title below)						
	FITUTION.	st) ( AL VENTURE OAD, BUILDII		NERS		Date of /15/20		t Trar	saction	(Mont	th/Day/Year)				belov	v)		Deid	ow)
(Street) MENLO (City)	PARK CA		94025 Zip)		4. If	f Amen	dment,	Date	of Origi	inal Fil	led (Month/Da	y/Year)		Line	e) Form	n filed by (	One Re	ng (Checleporting Pean One R	
		Tabl	e I - N	lon-Deriv	ative	Sec	uritie	s Ad	quire	d, D	isposed o	f, or E	Benefic	ciall	y Owne	ed			
1. Title of S	ecurity (Inst			2. Transaction Date (Month/Day/	on	2A. Do Execu	eemed	ate,	3. Transa Code ( 8)	ction	4. Securities Disposed Of 5)	Acquire	d (A) or		5. Amoun Securities Beneficia Owned Fo Reported	at of S	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price		Transacti (Instr. 3 a	on(s) nd 4)			(111341. 4)
Common	Stock			05/15/20	008				P		100,000	A	\$12.	.07	1,100	),000		I	By Institutional Venture Partners XII, L.P. <sup>(1)</sup>
Common	Stock			05/15/20	008				P		50,000	A	\$12.	.26	1,150	),000		I	By Institutional Venture Partners XII, L.P. <sup>(1)</sup>
Common	Stock			05/16/20	008				P		43,425	A	\$12.	.28	1,193	3,425		I	By Institutional Venture Partners XII, L.P. <sup>(1)</sup>
		Та	ble II								posed of, o				Owned		,		
L. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date,	4. Transa Code ( 8)	action	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	mber ative rities ired osed	6. Dat Expira		cisable and Date	7. Title Amour Securit Underl Derivat	and nt of ties ying	8. D S (I	Price of perivative security nstr. 5)	9. Numbo derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e s ally g i	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amoun or Numbe of Shares	r					
		Reporting Person*	XII L	.P															
(Last)		(First)	•	Middle)		-													

C/O INSTITUTIONAL VENTURE PARTNERS 3000 SAND HILL ROAD, BUILDING 2, STE 250(Street) MENLO PARK 94025 CA (City) (State) 1. Name and Address of Reporting Person\* Institutional Venture Management XII, LLC

(Last)	(First)	(Middle)					
	NAL VENTURE PA ROAD, BUILDING						
MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
1. Name and Address of Chaffee Todd C							
(Last) C/O INSTITUTIO	(First) NAL VENTURE PA	(Middle) RTNERS					
3000 SAND HILL	ROAD, BUILDING	2, STE 250					
(Street) MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
1. Name and Address of FOGELSONG	· -						
(Last)	(First)	(Middle)					
	NAL VENTURE PAT ROAD, BUILDING						
(Street) MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
1. Name and Address of Harrick Stephen	-						
(Last)	(First)	(Middle)					
	NAL VENTURE PAT ROAD, BUILDING						
——————————————————————————————————————	ROAD, BUILDING						
(Street) MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
1. Name and Address of Miller J Sanford	· -						
(Last)	(First)	(Middle)					
	NAL VENTURE PA						
SOUU SAND HILL	ROAD, BUILDING	2, 51E 25U					
(Street) MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
1. Name and Address of Phelps Dennis	· -						
	(First) NAL VENTURE PA						
3000 SAND HILL	ROAD, BUILDING	2, STE 250					
(Street) MENLO PARK	CA	94025					
(City)	(State)	(Zip)					
Explanation of Respor	nses:						

1. The shares are owned by Institutional Venture Partners XII, L.P. ("IVP XII"). Institutional Venture Management XII, LLC ("IVM XII") serves as the sole General Partner of IVP XII, and has sole voting and investment control over the respective shares owned by IVP XII, and may be deemed to own beneficially the shares held by IVP XII. IVM XII however owns no securities of the Issuer directly. Todd C. Chaffee, Norman A. Fogelsong, Stephen J. Harrick, J. Sanford Miller, and Dennis B. Phelps are Managing Directors of IVM XII and share voting and dispositive power over the shares held by IVP XII. Each of these individuals disclaims beneficial ownership of the shares reported herein, except to the extent of his respective pecuniary interest therein.

## Remarks:

/s/ Norman A. Fogelsong, 05/19/2008 **Managing Director** /s/ Norman A. Fogelsong, 05/19/2008 <u>Managing Director</u> /s/ Melanie Chladek, Attorney-05/19/2008 in-Fact for Todd C. Chaffee /s/ Melanie Chladek, Attorneyin-Fact for Norman A. 05/19/2008 **Fogelsong** /s/ Melanie Chladek, Attorney-05/1<u>9/2008</u> in-Fact for Stephen J. Harrick /s/ Melanie Chladek, Attorney-05/19/2008 in-Fact for J. Sanford Miller /s/ Melanie Chladek, Attorney-05/1<u>9/2008</u> in-Fact for Dennis B. Phelps \*\* Signature of Reporting Person Date

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

- $^{\star}$  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.