Synacor, Ir Form 4	ic.									
February 2	1, 2017									
FOR	ЛД								PPROVAL	
	UNITED	STATES S	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Public Utility Holdin 30(h) of the Investment C						rities Excha ompany Act	unge Act of 1934, t of 1935 or Secti	Estimated burden hou response	Estimated average burden hours per response 0.5	
1(b).										
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> Bhise Himesh			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			Synacor, Inc. [SYNC]			(Check all applicable)				
(Last) (First) (Middle) C/O SYNACOR, INC., 40 LA RIVIERE DRIVE, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 02/16/2017			_X_ Director10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer				
		4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
BUFFAL	D, NY 14202						Person	inore than one re	oporting	
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivativ	ve Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if 'Year)	3. Transactio Code (Instr. 8) Code V	Dispose (Instr. 3	d (A) or d of (D) , 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder P	eport on a separate lin	e for each aloss					or indirectly			
Actinities. R	eport on a separate fill		s or secu	intres Delle	Pers info requ	ons who rearmation con irred to resp	spond to the colle tained in this form ond unless the fo	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

number.

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired ( <i>A</i> Disposed o (Instr. 3, 4, 5)	f (D)				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (right to purchase)	\$ 3.15	02/16/2017		A	232,100		<u>(1)</u>	02/15/2027	Common Stock	232,10

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Bhise Himesh C/O SYNACOR, INC. 40 LA RIVIERE DRIVE, SUITE 300 BUFFALO, NY 14202	Х		Chief Executive Officer					
Signatures								
/s/ William J. Stuart, attorney-in-fact	02/21/2017							
**Signature of Reporting Person	Date							

## **Explanation of Responses:**

- \* 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).
- 100% of the option is exercisable on the date of grant. Shares purchased upon exercise of the option are subject to repurchase by the(1) Issuer until vested. 25% of the shares subject to the option vest on March 1, 2018 and an additional 1/48th of the shares subject to the option will vest each month thereafter, subject to the Reporting Person's continuous service through such dates.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.