FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
OND Number.	3233-0201							
Estimated average burden								
Estimated average burden								
	0.5							
hours per response:								

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

Name and Address of Reporting Person Deutsch Scott						2. Issuer Name and Ticker or Trading Symbol SYNAPTICS INC [SYNA]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 1251 M	(Fi	irst) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/30/2015										cer (give title ow) SVP o	Other below f Sales	(specify		
(Street)	Street) SAN JOSE CA 95131						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate) (Zip)													Person				
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date					tion	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. S Transaction Dis Code (Instr. and		4. Secu	Securities Acquired (A isposed Of (D) (Instr. 3,			5. Am Secui Bene Owne	nount of rities ficially	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amoun	nt (A	or l	Price			(Instr. 4)	(Instr. 4)		
Common Stock				03/30/2				M		23:	3	A	\$35.76	5	9,370	D				
Common Stock				03/30/2015				S ⁽¹⁾		23:	3	D	\$84		9,137	D				
Common Stock				03/31/2015				M		1,15	56	A	\$35.76	5]	10,293	D				
Common Stock			03/31/2	03/31/2015				S ⁽¹⁾		1,15	56	D :	\$81.67	7	9,137	D				
		Ta	able II						uired, Di						Owned	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date,	4. Transac Code (I 8)	5. Stion Number			6. Date Exercisal Expiration Date (Month/Day/Year		able and 7. Tite Amounts Secu Under Deriv		7. Title and Amount of Securities Jnderlying Jerivative Security (Instr. 3 and 4)		Price ferivative ecurity nstr. 5)	9. Number of derivative securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership		
		Code V (A) (D)				(D)	Date Exercisable		piration te	Title	Amo or Num of Shar	nber								
Employee Stock Option (Right to Buy)	\$35.76	03/30/2015			М			233	(2)	01	/28/2020	Common Stock	23	33	\$0.00	15,279	D			
Employee Stock Option (Right to Buy)	\$35.76	03/31/2015			М			1,156	(2)	01	/28/2020	Common Stock	1,1	56	\$0.00	14,123	D			

Explanation of Responses:

- 1. The shares were sold pursuant to a 10b5-1 Sales Plan dated February 13, 2014.
- 2. One-third of the total number of shares subject to the option vested and became exercisable on the 12-month anniversary of the January 28, 2013 grant date, and 1/36th of the total number of shares subject to the option vested or shall vest and became or shall become exercisable on the 28th day of each month thereafter until fully vested on January 28, 2016.

Remarks:

Kermit Nolan, as attorney-in-

04/01/2015

<u>fact</u>

** 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 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.