FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| 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 an | SYN 3. Date | Issuer Name and Ticker or Trading Symbol SYNAPTICS INC [SYNA] Date of Earliest Transaction (Month/Day/Year) 06/03/2010 | | | | | | | | | heck all a _l Dire | ector cer (give title | ng Per | 10% C | wner (specify | | | | |
|--|--|--|------------------|----------|----------|--|-------|-------|--|--------|---------------------------------|--|-------------|--------------|--|--|---------------|--|---|
| 3120 SC | | | | | | | | | | | | Executive Vice President | | | | | | | |
| (Street) SANTA (| CLARA CA | | 5054 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X For For | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting rson | | | |
| | | Tabl | e I - N | on-Deriv | ative S | Secu | ritie | s Acq | uired, [| Disp | osed o | f, or | Bene | ficia | ally Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | | | | Execution Date, | | | Transaction Disposed Code (Instr. and 5) | | | rities Acquired (a ed Of (D) (Instr. 3 | | | Secu Bend Own | nount of rities eficially ed owing | Form (D) o | ect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | | A) or O) | Price | Repo | orted saction(s) r. 3 and 4) | (msu | . 4) | (111501. 4) |
| Common | 010 | | S ⁽¹⁾ | | 6,252 | | D | \$3 | 0 | 27,068 | | D | | | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Conversion Date Execution Date, or Exercise (Month/Day/Year) if any (Month/Day/Year) Parivative | | | Code (In | Transaction of Code (Instr. 8) Se Ac (A Di of (Instr. 9) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date | | | Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | ount nber | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | / Di (I) (4) | wnership orm: irect (D) r Indirect) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. The shares were sold pursuant to a 10b5-1 Sales Plan dated May 27, 2010.

Remarks:

Kermit Nolan, as attorney-infact 06/03/2010

** 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.