

Sloma Geoffrey E  
 Form 3  
 November 08, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Sloma Geoffrey E		(Month/Day/Year)	SYNOPSIS INC [SNPS]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
700 EAST MIDDLEFIELD ROAD		10/31/2005	(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
MOUNTAIN VIEW, Â CA Â 94043			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			VP Finance, Corp Controller	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(Instr. 5)

Non-Qualified Stock Option (right to buy)	Â <u>(1)</u>	08/14/2010	Common Stock	22,250	\$ 14.6875	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(2)</u>	10/15/2011	Common Stock	2,500	\$ 16	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(3)</u>	12/23/2011	Common Stock	9,526	\$ 17.16	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(2)</u>	12/10/2011	Common Stock	4,500	\$ 17.58	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(2)</u>	09/19/2012	Common Stock	6,000	\$ 21.07	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(2)</u>	07/11/2011	Common Stock	3,000	\$ 22.025	D	Â
Non-Qualified Stock Option (right to buy)	Â <u>(2)</u>	04/15/2013	Common Stock	5,000	\$ 22.955	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Sloma Geoffrey E 700 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW, CA 94043	Â	Â	Â VP Finance, Corp Controller	Â

## Signatures

By: Stephen Buckhout pursuant to POA For: Geoffrey E Sloma 11/08/2005

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) 1/4 of the option vested 7/31/2001 with the remainder vesting in a series of 36 monthly installments. Original grant of 60,000 shares: 37,750 shares have been exercised prior to individual becoming a reporting person.
  - (2) 3/48ths of the option becomes exercisable on the date shown followed by 45 equal monthly installments
  - (3) Exercisable in 36 equal monthly installments beginning one month from grant date

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.