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 and Address of Reporting Person* QUINDLEN THOMAS M | | | | | 2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|---|--|------------|--|---------------------------------|--|--|-------|--|-------------------|--|---|-------------|--|---|--|----------------|---|---------------------------------------|--|
| (Last) | (First) | (1) | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 09/17/2014 | | | | | | | | X | Officer (g below) | | | Other (s below) | · I | |
| C/O SYNCHRONY FINANCIAL | | | | | | | | | | | | | | | See R | emark | KS | | |
| 777 LONG RIDGE ROAD | | | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | - 1 | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) | | | | | | | | | | | | | X | | , | • | Ü | | |
| STAMFORD | CT | 0 | 6902 | | | | | | | | | | | Form file | a by More | tnan O | ne Reportin | g Person | |
| (City) | (State |) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Т | able I - Nor | n-Deriva | tive S | ecuritie | s Acc | uired, I | Disp | osed of | f, or E | Benefic | ially Ow | ned | | | | | |
| Date | | | | 2. Transac Date (Month/Da | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | | 5. Amount Securities Beneficially Following | y Owned Reported | Form: | lirect (I) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount (A) or (D) | | | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Common Stock 09/1 | | | | 09/17/ | 17/2014 | | A | | 20,466(1) | | 66 ⁽¹⁾ A \$0.0 | | 136,358 | | | 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 | | 3A. Deemed Execution Date if any (Month/Day/Yea | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | | | xpiration ate | OI N | | Amount or Number of Shares | | (Instr. 4) | ion(s) | I(S) | | |
| Employee Stock Option (right to buy) | \$24.55 | 09/17/2014 | | A | | 31,926 | | (2) | 0 | 9/17/2024 | | nmon ock | 31,926 | \$0.00 | 206,23 | 33 | D | | |

Explanation of Responses:

- 1. Represents restricted stock units that will vest in five equal annual installments of 20% each, beginning on the first anniversary of the grant date. Each restricted stock unit represents a contingent right to receive one share of Synchrony Financial common stock.
- 2. The option will vest in five equal annual installments of 20% each, beginning on the first anniversary of the grant date.

Remarks:

Executive Vice President and Chief Executive Officer-Retail Card

/s/ Danielle Do, as attorney in fact 09/19/2014

** 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.