FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number: Estimated average burden	3235-0287						
hours per response:	0.5						

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* GREIG HENRY F					2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF]									all applicabl Director	Officer (give title		on(s) to Issuer 10% Owner Other (specify below)		
(Last) (First) (Middle) C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2018									See remarks					
(Street) STAMFORD (City)	CT (State)		5902 ip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	S. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		7	able I - No	n-Deriva	tive S	ecuritie	es Acq	uired,	Disp	osed o	f, or E	Benefic	cially Ow	ned					
Date				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securi Disposed	Securities Acquired (A) or sposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									v	Amount		(A) or (D)	Price	(Instr. 3 and 4)				(mou. 4)	
Common Stock 04				04/01/2	/01/2018			A		13,049(1)		A	\$33.53	161,096		D			
Common Stock 04				04/01/2	04/01/2018					2,366(2)		D	\$33.53	158,	158,730		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	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	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)		е	7. Title and Amount Securities Underlyi Derivative Security 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares	(Instr. 4)		(-/			
Employee Stock Option (right to buy)	\$33.53	04/01/2018		A		24,441		(3)		4/01/2028 Common Stock		24,441	\$0 24,44		11	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 (the "Company") common stock.
- 2. Reflects the number of shares of Company common stock withheld by the Company to pay the tax liability of the reporting person in connection with the vesting of restricted stock units.
- 3. The reporting person was awarded 24,441 employee stock options on April 1, 2018, which vest in five equal annual installments of 20% each, beginning on the first anniversary of the grant date.

Remarks:

Executive Vice President, Chief Credit Officer and Capital Management Leader

/s/ Danielle Do, as attorney in fact 04/03/2018

** 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.