FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Ш	Form 3 Holdings Reported.
П	Form 4 Transactions Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Ш	· ·																	
Name and Address of Reporting Person* MELITO DAVID P					2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
					-							X	Officer (giv	e title		Other (specify	
(Last) (First) (Middle) C/O SYNCHRONY FINANCIAL						3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017							See remarks					
777 LONG RI	DGE ROAI)																
(Street) STAMFORD CT 069			6902	2	4. If Ame	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					
(City)	(State)	(Z	ľip)		-		Form filed by More than One Reporting Person											
		7	[abl	le I - Non-D	erivative	Securit	ies Acq	uired, Dis	posed of	f, or B	eneficia	ally Ow	ned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)				n Date,	3. Transactio Code (Inst					i	Securities Beneficially Ow				ect Indirect irect Beneficial			
				(Month/Da	ay/Year)	8)	Amount	() (I	A) or D)	Price		at end of Issuer's Fiscal Year (Instr. 3 and 4)		(I) (Instr. 4)		Ownership (Instr. 4)		
			Та	able II - Deri (e.g				red, Dispo options, c				y Owne	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) of ative	Executi if any	cution Date, T	4. Transaction Code (Instr. 8)	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 (Inst and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	tive ties cially d ving	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
						(A)	(D)	Date Exercisable	Expiration Date	Title		Amount or Number of Shares			action(s)			
Dividend Equivalent Unit ⁽¹⁾	(1)	12/31/2017 ⁽¹⁾			А5	1,012 ⁽¹⁾		(1)	(1)	Comn	non Stock	1,012	\$0	1,0	012	D		
Phantom Stock Units	(2)	12/31/2017			A	499(2)		(2)	(2)	Comn	non Stock	499	\$0	7	' 80	D		

Explanation of Responses:

- 1. Represents 712, 26, 88, 120 and 66 dividend equivalent units accrued as dividends were paid on the common shares underlying restricted stock units originally granted to the reporting person on July 31, 2014, September 17, 2014, April 1, 2015, April 1, 2016 and April 1, 2017, respectively. The dividend equivalent units vest proportionately with and are subject to settlement and expiration upon the same terms as the restricted stock units to which they relate. Each dividend equivalent unit is the economic equivalent of one share of Synchrony Financial common stock.
- 2. The reported phantom stock units were acquired under the Synchrony Financial Restoration Plan and are to be settled upon the reporting person's retirement or certain involuntary terminations of employment, subject to the requirements set forth in the Restoration Plan. Each phantom stock unit is the economic equivalent of one share of Synchrony Financial common stock.

Remarks:

/s/ Danielle Do, as attorney in fact 02/14/2018

** 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.