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* Casellas Alberto (Last) (First) (Middle) 777 LONG RIDGE ROAD C/O CORPORATE SECRETARY					3. Da	2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF] 3. Date of Earliest Transaction (Month/Day/Year) 03/02/2020									elationship of Reporting Person(s) to Issuer ck all applicable) Director 10% Owner Officer (give title Other (specify below) See remarks				
(Street) STAMFORD (City)	CT (State)	06 (Zi _l	902 p)		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Ta	able I - Nor	n-Der	rivativ	ve S	ecuritie	s Acq	uired,	Disp	osed of	, or	Benefi	cially Ow	ned				
Date				ate		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar				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)	
								Code	v	Amount		(A) or (D)	Price	(Instr. 3 and 4)					
Common Stock 03/02					2/202	0(1)			S	14,669 D		\$29.97	69,0	,072		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)	3) or Exercise (Month/Day/Year) if any Co		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 Amou Securities Underl Derivative Securit 3 and 4)		derlying curity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	s s illy	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)			Expiration Date	Nu		Amount or Number of Shares		(Instr. 4)			

Explanation of Responses:

1. This transaction was made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on January 28, 2020.

Remarks:

EVP, CEO--CareCredit

/s/ Danielle Do as attorney in fact 03/04/2020

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).