FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: Estimated average burden	3235-0287							
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## 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

Name and Address of Reporting Person*     KEANE MARGARET M					2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [ SYF ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
KEANE WARGARET W				-					,				X	Director			10% Ow	vner		
(Last)	(First)	(1	Middle)	╌									X	Officer (gi	ve title		Other (s below)	specify		
C/O SYNCHR	` ′	•	,		3. Date of Earliest Transaction (Month/Day/Year)									See remarks						
777 LONG RIDGE ROAD					04/01/2016															
(Street)					If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
STAMFORD	CT	0	6902	"	4. II Amendment, Date of Original Flied (Month/Day/Teal)								X	,						
(City)	(State)	) (2	Zip)											Form filed by More than One Reporting Person						
			Table I - Nor	n-Deriva	tive S	Securitie	es Acc	quired,	Dis	posed o	f, or I	Benefi	cially Ow	ned						
in this or security (mean s)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		ities Acquired (A) or id Of (D) (Instr. 3, 4 and 5)			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			
						Code	v	Amount		(A) or (D)	Price	(Instr. 3 and				(Instr. 4)				
Common Stock				04/01/2016				A		65,633(1)		A	\$0	370,	,901		D			
Common Stock				04/01/2016				F		3,162(2)		D	\$29.33	367,	367,739		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amou Securities Underl Derivative Securi and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	-511(5)				
Employee Stock Option (right to buy)	\$29.33	04/01/2016		A		118,087		(3)		04/01/2026	Common Stock 118		118,087	\$0 58		52	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 option will vest in five equal annual installments of 20% each, beginning on the first anniversary of the grant date.

## Remarks:

President and Chief Executive Officer

/s/ Danielle Do, as attorney in fact 04/05/2016

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.