FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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 [*] MELITO DAVID P				Name and Ticker rony Financ	0,	bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) C/O SYNCHRO 777 LONG RID	(First) DNY FINANCIAL IGE ROAD	(Middle)	3. Date c 04/01/2	of Earliest Transac 017	tion (Month/Da	/Year)	x	Officer (give title below) See t	Other below remarks	(specify)	
(Street) STAMFORD	СТ	06902	4. If Ame	ndment, Date of C	Driginal Filed (M	onth/Day/Year)	6. Indiv X	vidual or Joint/Group F Form filed by One Form filed by More	Reporting Person	,	
(City)	(State)	(Zip)									
		Table I - No	n-Derivative	Securities Ac	quired, Dis	posed of, or Beneficia	lly Ow	ned			
4 Title of Occurity	(1		2 Transaction	24 Deemed	2	A Securities Accurited (A) or		E Amount of	6 Ourmanahim	7 Noture of	

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (li 8)		4. Securities Acquired (A) or Disposed 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 4)		(Instr. 4)
Common Stock	04/01/2017		А		4,592 ⁽¹⁾	A	\$ <u>0</u>	45,455	D	
Common Stock	04/01/2017		F		717 ⁽²⁾	D	\$34.3	44,738	D	
Common Stock	04/03/2017		S		600 ⁽³⁾	D	\$34.11	44,138	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)	Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8)				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 of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$34.3	04/01/2017		A		9,345		(4)	04/01/2027	Common Stock	9,345	\$ 0	66,239	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. 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. This transaction was made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 22, 2016.

4. The option will vest in five equal annual installments of 20% each, beginning on the first anniversary of the grant date.

Remarks:

Senior Vice President, Chief Accounting Officer and Controller

/s/ Danielle Do, as attorney in fact 04/04/2017

** 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.

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