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

1. Name and Address of Reporting Person* MELITO DAVID P (Last) (First) (Middle) C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD						Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF] Date of Earliest Transaction (Month/Day/Year) 07/31/2018								(Check	Relationship of Reporting Person(s) to Issuer eck all applicable) Director 10% Owner X Officer (give title Other (specify below) See remarks				pecify
(Street) STAMFORD (City)	CT (State)	06 (Zij	902		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	idividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				Transaction te onth/Day/Year)		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 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)				
Common Stock 07/3					1/2018	8(1)			F		9,616 ⁽¹⁾ D		\$28.94	32,6	32,657		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)	cive Conversion or Exercise Price of Derivative Security Conversion of Exercise (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 8)		te, 1	e, Transaction 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)		te	7. Title and Amou Securities Under Derivative Securi 3 and 4)		derlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e C s F illy C	0. Ownership form: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			(A)	(D)			Expiration Date	Nur		Number of Shares	(insu.								

Explanation of Responses:

1. Reflects the number of shares of common stock automatically withheld by the Company to pay the tax liability of the Reporting Person in connection with the vesting of restricted stock units granted on July 31, 2014 in connection with the Company's initial public offering (the "Founders' Grants"). No investment decision was made by the Reporting Person in connection with the withholding. The Founders' Grants, which had a four-year cliff vesting period, were awarded to promote retention and alignment with our stockholders, and to recognize that GE executive supplementary long-term benefits would vest and no longer continue to accrue upon separation from GE.

Remarks:

Senior Vice President, Chief Accounting Officer and Controller

/s/ Danielle Do, as attorney in fact 08/01/2018

** 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.