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* QUINDLEN THOMAS M  (Last) (First) (Middle) C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD	3. D 02/	2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [ SYF ]  3. Date of Earliest Transaction (Month/Day/Year) 02/14/2019							(Check	tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner Officer (give title Other (specify below)  See remarks				specify		
(Street)  STAMFORD CT 06902  (City) (State) (Zip)	4. If	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					
Table I - No	n-Derivati	ve Se	ecurities A	car	uired. D	Disp	osed of	. or E	Benefic	ially Ow	ned					
1. Title of Security (Instr. 3)  2. Tra Date (Mont			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 an		or	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)				(	
Dividend Equivalent Unit	end Equivalent Unit 02/14/2019				A		337(1)		A	\$30.83	127,981			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 Execution Date (Month/Day/Year) (Month/Day/Year)  (Month/Day/Year)	Code (		5. Number of Derivative Securities Acquired (A) or Disposed (D) (Instr. 3, 4 and 5)	of	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securit 3 and 4)		lerlying	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
Explanation of Personess:	Code	Code V (A) (D)					Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	on(3)			

1. Represents 29, 47, 74, 83 and 104 dividend equivalent units accrued on February 14, 2019 as dividends were paid on the common shares underlying restricted stock units originally granted to the reporting person on September 17, 2014, April 1, 2015, April 1, 2016, April 1, 2017 and April 1, 2018, 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.

## Remarks:

Executive Vice President and Chief Executive Officer-Retail Card

/s/ Danielle Do, as attorney in fact 02/19/2019

\*\* 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.