FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden 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* DOUBLES BRIAN D					2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF]										all applicabl Director Officer (gi	e)			· I		
(Last) (First) (Middle) C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2019										See remarks						
(Street) STAMFORD (City)	STAMFORD CT 06902 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
					Transaction		2A. Deemed Execution Date.		Juired, Disposed of, or Benefic 3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or	5. Amount of Securities	of	6. Owne	ership Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
					(Month/Day/Year)		if any (Month/Day/Year)		Code (Instr. 8)		2.0p0000 5. (b) (mon. 0, 4 m				Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			or Indirect (I) (Instr. 4)			
								Code	v	Amount		(A) or (D)	Price	(111511.4)							
Common Stock 04/0						/01/2019					1,936(1)		A	\$32.58	201,297		D				
Common Stock 04/0					01/20	1/2019		F		7,239(2)		D	\$32.58	194,058		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, T ar) if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		e Secu Pari) Deriv 3 and			derlying curity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e C s F lly D o (l	0. Ownership form: Direct (D) or Indirect () (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	ode V (A) (D)		Date Exercis	able	Expiration Date		•	Number of Shares								

Explanation of Responses:

- 1. On January 23, 2019, the Reporting Person earned common stock of Synchrony Financial (the "Company") in connection with the vesting of Performance Share Units ("PSUs") under the 2016-2018 Long-Term Performance Program based on pre-established performance goals for the 2016-2018 performance period. On April 1, 2019, the Reporting Person earned additional shares to reflect updated calculations of such performance metrics.
- 2. Reflects the number of shares of Company 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 and PSUs. No investment decision was made by the Reporting Person in connection with the withholding.

Remarks:

Executive Vice President and Chief Financial Officer

/s/ Danielle Do, as attorney in fact 04/03/2019

** 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.