SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden

0.5

hours per response:

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 [*] MOTHNER JONATHAN S				2. Issuer Name and Ticker or Trading Symbol <u>Synchrony Financial</u> [SYF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
	<u>JUNAI HAN S</u>									1	Director			10% O	
	(F : 1)									X	Officer (g below)	give title		Other (below)	
(Last) (First) (Middle) C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2022					See remarks						
(Street)			4. If Am	endment, Da	ate of Ori	ginal Filed (M	onth/Day/Y	(ear)		6. Indiv	idual or Joi	nt/Group F	iling (Che	eck Applic	able Line)
STAMFORD	СТ	06902						,		X		d by One d by More		-	ng Person
(City)	(State)	(Zip)										-			-
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
		1.													

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 Ac Disposed Of (D			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)		
C	ommon Stock	03/01/2022		А		22,803(1)	A	\$39.47	155,832	D	
C	ommon Stock	03/01/2022		F		9,422(2)	D	\$39.47	146,410	D	
C	ommon Stock	03/02/2022		S		20,000 ⁽³⁾	D	\$40	126,410	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities) 7. Title and Amount of Securities Underlying Derivative Security (Instr. 1. Title of Derivative 3. Transaction Date 3A. Deemed Execution Date 6. Date Exercisable and Expiration Date 8. Price of Derivative 11. Nature of Indirect 5. Number of 9. Number of 10. Conversion Transaction Derivative derivative Ownership or Exercise Price of Derivative Security (Month/Dav/Year) (Month/Day/Year) Security (Instr. 3) if any Code (Instr. 8) Security (Instr. 5) Beneficial Securities Securities Form: Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Direct (D) (Month/Day/Year) 3 and 4) Beneficially Ownership Owned or Indirect (Instr. 4) Following (I) (Instr. 4) Reported Transaction(s) (Instr. 4) Amount or Number of Date Expiration Code ۷ (A) (D) Exercisable Date Title Shares

Explanation of Responses:

1. Represents restricted stock units that will vest in three equal annual installments of 33.33% 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 automatically withheld by the Company to pay the tax liability of the Reporting Person in connection with the vesting of restricted stock units. No investment decision was made by the Reporting Person in connection with the withholding.

3. This transaction was made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on January 31, 2022.

Remarks:

EVP, General Counsel and Secretary

/s/ Danielle Do, as attorney in fact 03/03/2022

** 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.