Edgar Filing: MELITO DAVID P - Form 4

Form 4	VIDP										
November 19,	Λ								OMB AF	PROVAL	
	UNITED	STATES		ITIES AN nington, l			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or	r STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January 31 2005 Estimated average burden hours per response 0.5	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> MELITO DAVID P			2. Issuer Name and Ticker or Trading Symbol Synchrony Financial [SYF]				5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction (Che				(Cneck	k an applicable)			
C/O SYNCHRONY FINANCIAL, 777 LONG RIDGE ROAD			(Month/Day/Year) 11/15/2018					Director 10% Owner X_ Officer (give title Other (specify below) below) See remarks			
	(Street)	ndment, Date Original th/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
STAMFORD	, CT 06902							Form filed by Me Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecuri	ties Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, i		on Date, if	Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Dividend Equivalent	11/15/2018			Code V A	Amount 113 (1)	(A) or (D) A	Price \$ 26.51	Transaction(s) (Instr. 3 and 4) 32,690	D		
Unit							20.31				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MELITO DAVID P C/O SYNCHRONY FINANCIAL 777 LONG RIDGE ROAD STAMFORD, CT 06902			See remarks					
Signatures								
/s/ Danielle Do, as attorney in fact	11/1	9/2018						
<u>**</u> Signature of Reporting Person	E	Date						
Evalenction of Decreases								

Explanation of Responses:

- * 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).

Represents 3, 17, 26, 30 and 38 dividend equivalent units accrued on November 15, 2018 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,

(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:

Senior Vice President, Chief Accounting Officer and Controller

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.