Edgar Filing: SYNOVUS FINANCIAL CORP - Form 4

SYNOVUS Form 4 October 20,	FINANCIAL CC 2014	ORP										
FORM			CECU					NT		PPROV	AL.	
	UNITED	STATES		RITIES A			E COMMISSIO	```	OMB Number:	3235	-0287	
Check the check	nger			U			E	Expires:	Janua	ry 31, 2005		
subject Section Form 4	to SIAIEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response		
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	Responses)											
1. Name and Stelling Ke	Address of Reporting	Person [*]	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
		SYNOVUS FINANCIAL CORP [SNV]				(Check all applicable)						
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			X_ Director 10% Owner X_ Officer (give title Other (specify below) below)						
P.O. BOX		10/17/2014				Chairman, CEO, & President						
	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person								
COLUMB	US, GA 31902						Form filed by Person	y More	e than One R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivati	ve Securities A	Acquired, Disposed	of, o	r Beneficia	lly Owne	d	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Dispos (Instr. :	ed (A) or ed of (D) 3, 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Forr	wnership n: Direct or Indirect tr. 4)	7. Nature Indirect Benefici Ownersh (Instr. 4)	al 1ip	
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	Per info req disj	sons who re rmation con uired to resp	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are orm	e not	EC 1474 (9-02)		

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price c
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof		Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	(Month/Day/Y	ear) (Ins	str. 8)	Acqui (A) or Dispo of (D) (Instr.	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				(Instr. 5)	
			Cod	le V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Salary Stock Unit	\$ 0	10/17/2014	А		335 (1)		<u>(1)</u>	<u>(1)</u>	Common Stock	335	\$ 22.4

Reporting Owners

Reporting Owner Name / Address	Relationships							
i G	Director	10% Owner	Officer	Other				
Stelling Kessel D P.O. BOX 120 COLUMBUS, GA 31902	Х		Chairman, CEO, & President					
Signatures								
/s/ Mary Maurice Young	10/20/201	4						
**Signature of Reporting Person	Date							

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).

Salary stock units ("SSUs") are restricted stock units issued bi-weekly as a portion of the reporting person's salary compensation, net of withholdings and deductions, and are issued under the Synovus Financial Corp. 2013 Omnibus Plan. An SSU represents the right to

 receive a cash payment equal to the future value of a share of Synovus common stock. For more information, please see the Current Report on Form 8-K filed by Synovus on January 24, 2014, as amended on February 5, 2014. SSUs are fully vested on the date of grant and will settle in cash on January 15, 2015.

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.