SYNOVUS FINANCIAL CORP

Form 4

September 04, 2012

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

Number:

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Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * PAGE H LYNN				Symbol	2. Issuer Name and Ticker or Trading Symbol SYNOVUS FINANCIAL CORP			5. Relationship of Reporting Person(s) to Issuer			
			[SNV]	OS PIN	AIVEIAL COM	(Check all applicable)					
(L	(Last) (First) (Middle)			(le) 3. Date of	f Earliest T	ransaction	_X_ Director		Owner		
D.O. DOW 100			(Month/D	•		Officer (give below)	below)	er (specify			
P.O. BOX 120			08/30/2	012							
(Street)				4. If Ame	ndment, Da	ate Original	6. Individual or Joint/Group Filing(Check				
				Filed(Mor	Filed(Month/Day/Year)			Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
COLUMBUS, GA 31902							Person				
(0	City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative Securities Acq	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title	of	2. Transaction	Date 2A	A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature		
Securit	ty	(Month/Day/Y	ear) Ex	xecution Date, if	Transacti	on(A) or Disposed of (D)	Securities	Form: Direct	Indirect		
(Instr.	3)		an	ıy	Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial		
			(N	Month/Day/Year)	(Instr 8)		Owned	Indirect (I)	Ownershi		

1.Title of	2. Transaction Date		3.	4. Securities	•		5. Amount of	6. Ownership	
Security	(Month/Day/Year)	Execution Date, if		n(A) or Disp		f (D)	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	(Instr. 3, 4 a	and 5)		Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership
							Following	(Instr. 4)	(Instr. 4)
					(A)		Reported		
					or		Transaction(s)		
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	08/30/2012		J <u>(1)</u>	148,851	D	\$0	394,528	I	By GRAT
Common Stock	08/30/2012		J <u>(1)</u>	148,851	A	\$0	319,567	D	
Common Stock							11,515	I	By Spouse

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

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number.

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.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	m: .1	or		
						Exercisable	Date	Title	Number		
				~					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PAGE H LYNN								
P.O. BOX 120	X							
COLUMBUS, GA 31902								

Signatures

Person

/s/ Mary Maurice
Young

**Signature of Reporting

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).
- (1) On August 30, 2012, the form of ownership of these shares changed when the reporting person's GRAT transferred the shares for no consideration to the reporting person. The transaction did not result in any change in the reporting person's total beneficial ownership.

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.

Reporting Owners 2