SYNOVUS FINANCIAL CORP

Form 4/A August 14, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287 Number:

OMB APPROVAL

January 31, Expires:

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response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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

may continue. See Instruction 1(b).

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

KAMENSKY ALLAN E Symbol			or Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) P.O. 120	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/11/2014			Director 10% OwnerX Officer (give titleX Other (specify below) EVP and Corporate Secretary / General Counsel					
	(Street)	endment, Date Original nth/Day/Year) 014				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
COLUMBUS, GA 31902								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Execution	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8)	(Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	08/11/2014			P P	5,254	A	\$ 22.87	35,258 (1) (2)	D		
Common Stock	08/11/2014			P	400	A	\$ 22.86	35,658	D		
Common Stock								1,970 (3)	I	By Children	

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

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displays a currently valid OMB control 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	Transaction	orNumber	Expiration D	xpiration Date		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)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(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
reporting o where theme, trade ess	

Director 10% Owner Officer Other

KAMENSKY ALLAN E

P.O. 120 EVP and Corporate Secretary General Counsel

COLUMBUS, GA 31902

Signatures

/s/ Mary Maurice Young 08/14/2014

**Signature of Reporting Date
Person

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) The Company completed a one-for-seven reverse stock split effective May 16, 2014. The amount stated represents the post-split adjusted amount, and fractional shares are not included because all fractional shares were aggregated into whole shares and sold on the open market at prevailing prices by the Company's transfer agent. In lieu of fractional shares, the reporting person received a cash payment equal to his or her allocable share of the totel proceeds of these sales.
- (2) The reporting person's previous Form 4 dated August 13, 2014 inadvertently overstated the reporting person's beneficial stock ownership by failing to account for the reverse stock split, as described above.
- (3) As adjusted post-split, as described above.

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.

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