FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL	
	OMB Number:	3235-0287
ı	Estimated average burden	
ı	hours per response:	0.5

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	on 30(h) of the	Investmer	nt Comp	any Act of	1940									
1. Name and Address of Reporting Person* SMITH LOWNDES ANDREW						2. Issuer Name and Ticker or Trading Symbol Symetra Financial CORP [SYA]									hip of Reporting Person(s) to pplicable) Director		o Issuer	10% Own		
(Last) 777 108TH AVE NE SUITE 1200	(First)	(Mi	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/01/2016									(Officer (give title	below)		Other (spe	ecify below)	
(Street) BELLEVUE (City)	WA (State)	98 (Zi	004 p)		If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
			7	Гаble I -	Non-Der	ivative Se	curities A	cquired,	Disp	osed of	, or Bene	ficially Ow	ned							
					2. Transact Date				3. Transaction 4. Securi Code (Instr. 8) 3, 4 and 9			rities Acquired (A) or Disposed Of (D)			D) (Instr. 5. Amount of Securit Beneficially Owned F			rship Form: O) or Indirect (I)	7. Nature of Indirect Beneficial	
					(Month/Day	y/Year) if any (Mon		Code	v	Amount		(A) or (D)	Price	Rep (Inst	orted Transaction r. 3 and 4)	(s)			Ownership (Instr. 4)	
Common Stock ⁽¹⁾					02/01/2	016		D		10	0,000	D	\$32 ⁽²⁾		0			D		
				Table I			rities Acq					ially Owne	ed							
1. Title of Derivative Security (Ins. 3)	z. Conversion or Exercise Price of Derivative Security	rsion Date rcise (Month/Day/Year) of tive		4. Transa (Instr. 8)	ction Code		f Derivative cquired (A) or (D) (Instr. 3, 4	Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and A Derivative S	urities Underlyin 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisa		expiration Date	Title	Amount or Number of Si								
Evaluation of Decames:																				

1. On February 1, 2016, Sumitomo Life Insurance Company acquired the Issuer pursuant to the Agreement and Plan of Merger by and among the Issuer, Sumitomo Life Insurance Company and SLIC Financial Corporation dated as of August 11, 2015 (the "Merger Agreement").

2. The Merger Agreement provides that, at the Effective Time (as defined in the Merger Agreement), each outstanding share of the Issuer's common stock owned by the reporting person was cancelled and converted into the right to receive \$32.00 in cash.

Remarks:

EXHIBIT LIST: EX-24 Smith POA

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).

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*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.

Jacqueline M. Veneziani, Attorney In Fact 02/02/2016 ** Signature of Reporting Person

Date

POWER OF ATTORNEY SEC SECTION 16 FILINGS

KNOW ALL BY THESE PRESENTS, that the undersigned hereby constitutes and appoints each of David S. Goldstein, Jacqueline M. Veneziani, Julie M. Bodmer and any execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Symetra Financial Corporation or one or mc do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form3, 4, or submit a Form ID for purposes of obtaining an EDGAR filing code, if necessary;

(4) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information from any third party, including the Corporation, broke take any other action of any type whatsoever in connection with the foregoing which, in the opinion of any Attorney-in-Fact, may be of benefit to, in 1 the undersigned acknowledges that:

take any other action of any type whatsoever in connection with the Toregoing wnich, in the upilion of any Actorney and Actorney authorizes, but does not require, the Attorney-in -Fact to act at his or her discretion on information provided to such Attorney the foregoing Attorney authorizes, but does not require, the Attorney-in -Fact to act at his or her discretion on information provided to such Attorney (2) the foregoing Attorney-in-Fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Corporation assuming, any (3) this Power of Attorney does not relieve the undersigned from responsibility from compliance with the undersigned's obligations under Section 16 of the The undersigned hereby grants to each Attorney-in-Fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, This Power of Attorney supersedes any power of attorney previously executed by the undersigned regarding the purposes outlined in the first paragraph hereof (This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersign NITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 7th day of February, 2013.

/s/ Lowndes A. Smith Signature

Lowndes A. Smith Print Name