FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Goldstein David S | | | | | | 2. Issuer Name and Ticker or Trading Symbol Symetra Financial CORP [SYA] | | | | | | | | | Check all a Dir | | | Owner er (specify | |
|---|---|--|---|---------|---|--|---------|---|-------------------|---|---------------------|---|---|-------|--|---|---|--|--|
| | (Last) (First) (Middle) 777 108TH AVE NE SUITE 1200 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/01/2016 | | | | | | | | | | X Officer (give title Other (specify below) SVP - General Counsel | | | | |
| (Street) BELLEVUE WA 98004 (City) (State) (Zip) | | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | rson | | | | |
| | | Tabl | e I - Nor | n-Deriv | /ative | Se | curitie | s Acc | quired, | Disp | osed o | f, or | Bene | ficia | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transport Date (Month/L | | | | | h/Day/Year) if any | | | A. Deemed xecution Date, any Month/Day/Year) | | | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | nd Sec Ben Owr | mount of urities eficially ed Following orted | 6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (I | A) or D) | Price | Tran | saction(s) r. 3 and 4) | | (111511.4) | |
| Common Stock ⁽¹⁾ 02/01 | | | | | 01/2016 | | | | | | 8,704 | 1 | D | \$32 | 2(2) | 0 | D | | |
| Common Stock (Restricted) ⁽¹⁾ 02/01 | | | | | 1/201 | 6 | | | | | 5,899 | | D | \$32 | 2(3) | 0 | D | | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | y Owne | d | | | |
| 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. Transaction Code (Instr. 8) | | of | | Expiration | 5. Date Exercisable and Expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | <u> </u> | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | \v | (A) | (D) | Date Exercisal | | Expiration Date | Title | of Shai | | | | | | |

Explanation of Responses:

- 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 (the "per share merger consideration").
- 3. The Merger Agreement provides that, at the Effective Time, each outstanding restricted share of the Issuer's common stock owned by the reporting person was cancelled and converted into the right to receive the per share merger consideration.

Remarks:

Jacqueline M. Veneziani, 02/02/2016 **Attorney In Fact**

** Signature of Reporting Person Date

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).
- ** 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.