**FORM 3**

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

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**1. Name and Address of Reporting Person**  
Kang Andrew  
(First)  
(Last)  
(Middle)  
5565 GLERNRIDGE CONNECTOR  
SUITE 700  
(Street)  
ATLANTA GA 30342  
(City)  
(State)  
(Zip)

**2. Date of Event Requiring Statement**  
(Month/Day/Year)  
09/14/2020

**3. Issuer Name and Ticker or Trading Symbol**  
GreenSky, Inc. [ GSKY ]

**4. Relationship of Reporting Person(s) to Issuer**  
(Check all applicable)  
X Director  
10% Owner  
Officer (give title below)  
EVP and CFO

**5. If Amendment, Date of Original Filed**  
(Month/Day/Year)

**6. Individual or Joint/Group Filing**  
(Check Applicable Line)  
X Form filed by One Reporting Person  
Form filed by More than One Reporting Person

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### Table I - Non-Derivative Securities Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 4)</th>
<th>2. Amount of Securities Beneficially Owned (Instr. 4)</th>
<th>3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>4. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
</table>

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### Table II - Derivative Securities Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)

<table>
<thead>
<tr>
<th>1. Title of Derivative Security (Instr. 4)</th>
<th>2. Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)</th>
<th>4. Conversion or Exercise Price of Derivative Security</th>
<th>5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>6. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
</table>

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**Explanation of Responses:**  
**Remarks:**

No securities are beneficially owned.

/s/ Steven Fox, as attorney-in-fact  
Date: 09/21/2020

**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 5 (b)(v).  
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.