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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN 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

	pe Response	es)													
Name and Address of Reporting Person * Nashat Amir				2. Issuer Name and Ticker or Trading Symbol Syros Pharmaceuticals, Inc. [SYRS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director X_ 10% Owner				
(Last) (First) (Middle) C/O SYROS PHARMACEUTICALS, INC., 620 MEMORIAL DRIVE, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 09/15/2016								e title below)		er (specify belo	w)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
	IDGE, MA										rorm med by	More than One	Reporting Perso	1	
(Cit	y)	(State)	(Zip)			Table	e I -	Non-Deriva	tive Securities	Acquired	, Disposed	l of, or Ben	eficially Ow	ned	
1.Title of S (Instr. 3)	Security		Date (Month/Day/Year)	2A. Deen Execution any (Month/E	n Dat	rear) Co		(A (I)	Securities Acq o) or Disposed on other 3, 4 and 5) (A) or mount (D)	of (D) Ow Tra		ving Report		Ownership	Beneficial Ownership
Keilinder.	Report on a	separate fine for ear	ch class of securities	Delicitora	шу о	whed di	recu _.	Person: contain	who respored in this for	m are no	required	to respo	nd unless t		474 (9-02)
								ired, Dispo	splays a curr	eficially O		ontroi nun	nber.		
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	tion	s, warra 5. Numb of Derivati Securitie Acquired (A) or Disposed (D) (Instr. 3,	ve es d	ired, Dispo options, co	sed of, or Bend evertible securer ercisable and Date	eficially O	wned d f g	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	tion	s, warra 5. Numb of Derivati Securitie Acquire (A) or Dispose (D)	ve es d	ired, Dispo options, co 6. Date Exe Expiration	sed of, or Bendivertible security recisable and Date y/Year)	ficially O ities) 7. Title an Amount of Underlyin Securities	wned d f g	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Ownersh Form of Derivativ Security: Direct (I or Indire	of Indirect Beneficia Ownersh (Instr. 4)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Nashat Amir C/O SYROS PHARMACEUTICALS, INC. 620 MEMORIAL DRIVE, SUITE 300 CAMBRIDGE, MA 02139	X	X				

Signatures

/s/ Kyle Kuvalanka, as attorney-in-fact	09/16/2016
**Signature of Reporting Person	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).
- The option becomes exercisable as to 16.66% of the shares underlying the award on the six month anniversary of the award, with the remainder vesting in equal monthly (1) installments of 2.77% of the shares underlying the award until the third anniversary of the date of the award, subject to Dr. Nashat's continued service as a director through each applicable vesting date.

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.