FORM 4	4
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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 3235-0287 OMB Number: Estimated average burden hours per response .. 0.5

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

(Find of Type Responses)								+			
1. Name and Address of Reporting Person [*] SHARP PHILIP A	2. Issuer Name and Syros Pharmaceu			· ·	l	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner					
(Last) (First) C/O SYROS PHARMACEUTICAL MEMORIAL DRIVE, SUITE 300	G 11 1 G (0.0	Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below) 6/08/2017 Officer (give title below) Other (specify below)								ow)	
(Street) CAMBRIDGE, MA 02139		4. If Amendment, Date Original Filed(Month/Day/Year) 06/12/2017						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		4. Securi (A) or D (Instr. 3,	isposed o 4 and 5) (A) or	f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I)	Beneficial Ownership	
			Code	V	Amount	(D)	Price		(Instr. 4)		

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

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form 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)														
	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	tion)	5. Number n of Derivative		6. Date Exer Expiration D (Month/Day	cisable and Date	7. Title and Amount		Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
				Code	v	(A)		Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 14.62 (2)	06/08/2017		А		11,000		<u>(1)</u>	06/07/2027	Common Stock	11,000	\$ 0	11,000	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SHARP PHILIP A C/O SYROS PHARMACEUTICALS, INC. 620 MEMORIAL DRIVE, SUITE 300 CAMBRIDGE, MA 02139	Х						

Signatures

/s/ Kyle D. Kuvalanka, as attorney-in-fact 09/22/2017 **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 50% of the shares underlying the award on the six month anniversary of the award, with the remainder vesting in equal monthly installments until (1) the first anniversary of the date of the award, subject to the reporting person's continued service as a director through each applicable vesting date.

(2) This amendment to the Statement of Changes in Beneficial Ownership of Securities on Form 4 filed with the Securities and Exchange Commission on June 12, 2017 is being filed to correct a typographical error in the exercise price of the option to purchase Common Stock held by the reporting person.

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.