FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours per respon	se 0.5				

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 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

Print or Ty	pe Response	es)															
1. Name and Address of Reporting Person * AKKARAJU SRINIVAS				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 10% Owner					
	OS PHAR	(First) MACEUTION E, SUITE 3	(Middle) CALS, INC., 620	3. Date of Earliest Transaction (Month/Day/Year) 12/12/2017							r (give title belo	w)	Other (specify	below)			
(Street) CAMBRIDGE, MA 02139				4. If Amendment, Date Original Filed(Month/Day/Year)							th/Day/Yea	_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				
(City)	(State)	(Zip)			Tab	ole I -	Non-	Deri	vative S	ecuritie	s Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
3		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
						ode	V	V Amount (A) or (D) Price		(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	(Instr. 4)			
Common	Stock		12/12/2017				I	P		14,774	4 A	\$ 9.4	735,494		I		see footnote (1)
Common	Stock		12/13/2017				I	P		68,400	A	\$ 8.97 (2)	803,894	803,894		I	see footnote
Common	Common Stock 12/14/2017				I	?		26,600	A	\$ 8.99 (3)	830,494	830,494		I	see footnote		
Reminder:	Report on a	separate line f	for each class of secu	ırities b	eneficia	lly o	wned		•								
								- (cont	ained i	n this f	orm a	re not req	ection of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
			Table II - I											l			
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date Orr Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea		n 3A. Deemed Execution Da			ion	5. Number of		6. D and	and Expiration Date (Month/Day/Year) A U Se			8. Price of Derivative Security (Instr. 5)			Owners Form o Derivat Securit Direct (or India	Ownersh (Instr. 4) D) ect
					Code	V	(A)	(D)	Date Exe	e rcisable	Expirat Date	ion Tit	Amount or Number of Shares				

Reporting Owners

Domontino Oromon Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
AKKARAJU SRINIVAS							
C/O SYROS PHARMACEUTICALS, INC.	X						
620 MEMORIAL DRIVE, SUITE 300	Λ						
CAMBRIDGE, MA 02139							

Signatures

/s/ Srinivas Akkaraju	12/14/2017
**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).
- (1) Shares held by Samsara BioCapital, L.P. ("Samsara BioCapital"). The reporting person is a managing member of Samsara BioCapital GP, LLC, the general partner of Samsara BioCapital. The Reporting Person disclaims beneficial ownership of these shares except to the extent of the Reporting Person's pecuniary interest therein.
- (2) Represents the weighted average purchase price of the Shares purchased ranging from a low of \$8.97 to a high of \$8.98 per share. The reporting person undertakes, upon request by the Commission staff, the issuer or a security holder of the issuer, to provide full information regarding the number of shares purchased at each separate price.
- (3) Represents the weighted average purchase price of the Shares purchased ranging from a low of \$8.98 to a high of \$9.00 per share. The reporting person undertakes, upon request by the Commission staff, the issuer or a security holder of the issuer, to provide full information regarding the number of shares purchased at each separate price.

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.