## FORM 4

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

OMB APPROV	/AL
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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).

#### 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

1. Name and Address of Reporting Person * Haas Jason				2. Issuer Name and Ticker or Trading Symbol Syros Pharmaceuticals, Inc. [SYRS]					5. F	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) C/O SYROS PHARMACEUTICALS, INC., 35 CAMBRIDGEPARK DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 10/12/2021				X	X Officer (give title below) Other (specify below)  Chief Financial Officer					
(Street) CAMBRIDGE, MA 02140				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 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 S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	r) any	eemed tion Date, i h/Day/Year	Code (Instr	. 8)	Amount (D)	Own Trai (Ins		ecurities Be ng Reported	I	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								s who respon						1474 (9-02)
			Table II				in this a curre juired, Disp	form are not rently valid OMI	equired to B control n	respond ι iumber.				1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	(e.g., pt 4. Transact Code	5. Nur Deriva Securi Acquir	nber of tive ties red (A) posed of	in this a curre quired, Disp s, options, co	form are not rently valid OMI  osed of, or Beno onvertible securercisable and Date	equired to B control n	respond unumber. ned Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners Form of Derivati Security Direct ( or Indires)	11. Nature of Indire Benefici Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., pt 4. Transact Code	5. Number of Derivation Acquire or Disposition (Instr.	hber of tive ties red (A) posed of 3, 4,	in this a curred, Dispos, options, continued and the continue of the continue	form are not r ntly valid OMI osed of, or Bend onvertible secur ercisable and Date y/Year)  Expiration	equired to B control n eficially Own ities)  7. Title and of Underly Securities	respond unumber. ned Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Owners Form of Derivati Security Direct ( or Indire	11. Nature of Indire Benefici Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Haas Jason C/O SYROS PHARMACEUTICALS, INC. 35 CAMBRIDGEPARK DRIVE CAMBRIDGE, MA 02140			Chief Financial Officer		

### **Signatures**

/s/ Jason Haas	10/13/2021
**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) This option becomes exercisable as to one quarter (1/4th) of the shares on October 12, 2022, with the remainder vesting in monthly installments equal to one forty-eighth (1/48th) of the original number of shares at the end of each of the next thirty-six (36) months thereafter.

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 no	ot required to respond unless the form displays a currently valid OMB number.