SEC Form 3

FORM 3

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

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person [*] CRAVES FRED B	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SYNTA PHARMACEUTICALS CORP [MDGL]						
(Last) (First) (Middle)	07/22/2016		Relationship of Reporting Pers heck all applicable) X Director X	son(s) to Issu 10% Own	(Mor	If Amendment, Date of Original Filed Anoth/Day/Year) Individual or Joint/Group Filing (Check pplicable Line) X Form filed by One Reporting Person		
C/O BAY CITY CAPITAL, LLC 750 BATTERY STREET, SUITE 400			Officer (give title below)	Other (sp below)	ecify App			
(Street) SAN FRANCISCO CA 94111						Form filed by More than One Reporting Person		
(City) (State) (Zip)								
	Table I - Non-De	rivative	e Securities Beneficiall	y Owned				
1. Title of Security (Instr. 4)			Amount of Securities neficially Owned (Instr. 4)			. Nature of Indirect Beneficial Ownership Instr. 5)		
(e			Securities Beneficially s, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Secur 4)		4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		iration		Amount or Number of	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		
	Exercisable Date	•	Title	Shares				

Explanation of Responses:

No securities are beneficially owned.

/s/ Fred B. Craves

** Signature of Reporting Person

07/26/2016

Date

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).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.