## FORM 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0362							
	le constant							

1.0

hours per response:

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Form 3 I	Holdings Repo	rted.															
Form 4	Transactions F	Reported.	Filed	pursuant to S or Section 3													
Name and Address of Reporting Person*  Bahcall Safi R			SYNTA	2. Issuer Name <b>and</b> Ticker or Trading Symbol SYNTA PHARMACEUTICALS CORP [							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				SNTA]	SNTA]							X Director					Owner
(Last) (First) (Middle) C/O SYNTA PHARMACEUTICALS CORP.				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007						y/Year)	X Officer (give title below)  President an				belo	er (specify w)	
45 HARTWELL AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)						· ·	Individual or Joint/Group Filing (Check Applicable Line)							
(Street) LEXINGTON MA 02421												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (	Zip)														
		Tab	le I - Non-Deriv	ative Secu	ıritie	s Acq	uire	d, Dis	posed o	f, or	Benefici	ally	Owne	ed			
Date			2A. Deemed Execution Date,		3. Transaction		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5				5. Amou Securiti		es	6. Ownership		7. Nature of Indirect	
		(Month/Day/Year)	if any (Month/Day/Y	Year) Code (In		nstr.	Amour		(A) or (D) Price			Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)	
Common Stock		07/30/2007			<b>J</b> <sup>(1)</sup>		24,	,250	D	\$0		0		I		By 2004 Neta Bahcall GRAT	
Common Stock												15,000		I		By Safi R. Bahcall Irrevocable Trust <sup>(2)(3)</sup>	
Common Stock												2,250	0,525		D		
		Ta	able II - Derivat (e.g., p	tive Securi								y O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date,		of Deriv Secu Acqu (A) o Disp of (D (Inst	of Experience (Note that the control of the control		Date Exercisable and piration Date on the piration Date on the piration Day/Year)		Amo Secu Unde Deriv	cle and unt of rities erlying rative rity (Instr. 14)	of Der Sec	Price erivative ecurity nstr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indire (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)
							Dat-		Evnisati		or Number						

## Explanation of Responses:

1. Represents a distribution of shares to Neta Bahcall by the 2004 Neta Bahcall GRAT, which shares were previously reported as indirectly beneficially owned by the Reporting Person.

(A) (D)

2. The Reporting Person disclaims beneficial ownership of these shares except to the extent of any pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of the beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

Exercisable Date

3. The number of shares indirectly beneficially owned excludes an aggregate of 70,750 shares which were inadvertently reported on the Reporting Person's prior reports as indirectly beneficially owned but were not and are not indirectly beneficially owned.

/s/ Ann Margaret Eames. Attorney-in-Fact 02/14/2008

\*\* Signature of Reporting Person Date

Shares

Title

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 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).

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.