FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	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

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*  Koya Keizo  (Last) (First) (Middle)  C/O SYNTA PHARMACEUTICALS CORP.  45 HARTWELL AVENUE  (Street)  LEXINGTON MA 02421						2. Issuer Name and Ticker or Trading Symbol SYNTA PHARMACEUTICALS CORP [ SNTA ]  3. Date of Earliest Transaction (Month/Day/Year) 08/24/2009  4. If Amendment, Date of Original Filed (Month/Day/Year)								(Cr	Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director			
(City)	(St	ate) (Z	Zip)												P	erson		
		Tabl	e I - I	Non-Deriv	ative \$	Secu	ıritie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	lly Ow	ned		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				/Year) i	Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (ADS) Disposed Of (D) (Instr. 3					nd Se Be Ow	Amount of curities neficially rned llowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Price	Re Tra	ported ansaction(s) str. 3 and 4)	(11150: 4)	(Instr. 4)
Common Stock 08/24/200					09				P		10,000 A \$2		\$2.84	34	43,045	D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	tive Conversion or Exercise (Month/Day/Year) 3) Price of Derivative Security Execution Date, if any (Month/Day/Year)		Code (I	saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instra 3 and 4)  Amount or Numb of Title Share:		ount	8. Price of Derivati Security (Instr. 5	Beneficially	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Ann Margaret Eames. Attorney-in-Fact 08/26/2009

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

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