FORM 4

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

Washington, D.C. 20549

OMB APPROVAL									
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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

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*  KUFE DONALD W						2. Issuer Name and Ticker or Trading Symbol SYNTA PHARMACEUTICALS CORP [ SNTA ]										tionship of Reporting all applicable) Director Officer (give title below)		10% (		Owner (specify	
(Last) (First) (Middle) C/O SYNTA PHARMACEUTICALS CORP.						3. Date of Earliest Transaction (Month/Day/Year) 12/12/2012												b	below)		
45 HARTWELL AVENUE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					Applicable	
(Street) LEXINGTON MA 02421															X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)																		
		Table	e I - N	on-Deriv	ative S	Secu	ıritie	s Acq	uired, [	Disp	osed o	f, or	Bene	ficia	lly C	Owne	d				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. and 5)						3, 4 Secu Bene Owne		cially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	,  :	Following Reported Transaction(s) (Instr. 3 and 4)		(111301 : 4)	,		
Common Stock 12/12/2						2012			A		5,814	1	A	\$8.6		17,748		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)	vative rity or Exercise Price of Derivative Security  Date (Month/Day/Year) if any (Month/Day/Year)			4. Transac Code (II 8)		vative rities vired rosed ) r. 3, 4 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date			Amo Secu Und Deri	Amo or Nun of	ount nber	t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or Indi (I) (Inst	D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

/s/ Ann Margaret Eagleston, Attorney-in-Fact 12/14/2012

\*\* 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).