FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

OMB APPROVAL OMB Number: Estimated average burden

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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* Ordentlich Peter (Last) (First) (Middle) C/O SYNDAX PHARMACEUTICALS, INC.						Issuer Name and Ticker or Trading Symbol Syndax Pharmaceuticals Inc [SNDX] 3. Date of Earliest Transaction (Month/Day/Year) 05/17/2017											onship of Reporting Person(s) to Issuer applicable) Director 10% Owner Officer (give title below) Chief Scientific Officer				
35 GATE (Street) WALTH. (City)	AM M	tate)	02451 (Zip)			Line) X Form filed b									m filed by C m filed by M son	t/Group Filing (Check Applicable by One Reporting Person by More than One Reporting					
1 Tido of 6	Saarreiter (Inc.		le I - Nor	1-Deriv		_			_	ired, I	Disp						ed ount of	6.0	Ownership	7. Nature	
			Date (Month/E		ar)	2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			u (A) or r. 3, 4 an	d Secu Bene		For (D)	m: Direct or Indirect Instr. 4)	of Indirect Beneficial Ownership		
							,			Code	v	Amount		(A) or (D)	Price		rted action(s) 3 and 4)	"		(Instr. 4)	
Common Stock 05/17/						2017			M		732		A	\$3.0)8	5,000		D			
Common	Stock			05/17	//2017	7				S ⁽¹⁾		5,00	0	D	\$1	5	0.00 D				
		Т	able II - I	Derivat (e.g., p												y Owne	t		·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transa Code (I			Of Deriv Secu Acqu (A) of Dispo of (D) (Instr	of E		Date Exe Diration I Donth/Day	le and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		ve es ally ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Dat Exe	e ercisable		piration ite	Title	1	Amount or Number of Shares						
Employee Stock Option (right to	\$3.08	05/17/2017			M			732		(2)	05	/09/2023	Com Sto		732	\$0.00	0.0	0	D		

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 plan adopted by the Reporting Person.
- 2. The option is fully vested.

Remarks:

/s/ Michael A. Metzger, 05/19/2017 Attorney-in-Fact

** Signature of Reporting Person 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 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.