FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICIAL | L OWNERSHIP |
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| OIVID APPR | OIVID 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).

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* <u>Metzger Michael A</u> | | | | 2. Issuer Name and Ticker or Trading Symbol Syndax Pharmaceuticals Inc [SNDX] | | | | | (Ch | eck all application | able) | erson(s) to Issu 10% Ow Other (s | ner | | |
|---|---|------------|---|---|--|---|-------------|--|----------------------------|---|-------------------------------------|---|--|---|--|
| (Last) (First) (Middle) C/O SYNDAX PHARMACEUTICALS, INC. 35 GATEHOUSE DRIVE, BUILDING D, FLOOR 3 | | | 03 | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018 | | | | | | below) | below) President and COO | | , | | |
| (Street) WALTHAM MA 02451 (City) (State) (Zip) | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | Line | dividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | on | 2A. Deeme Execution if any (Month/Da | ed Date, | 3. Transacti Code (Ins | 4. Secur Dispose tr. | ities Acquire d Of (D) (Ins | ed (A) or str. 3, 4 and | 5. Amoun | s Fo lly (D ollowing (I) | orm: Direct) or Indirect (Instr. 4) | 7. Nature of ndirect Beneficial Ownership Instr. 4) |
| 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) | Conversion Date Execution or Exercise (Month/Day/Year) if any | | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | 3) | |
| Stock Option (Right to Buy) | \$9.4 | 03/01/2018 | | A | | 125,000 | | (1) | 03/01/2028 | Common Stock | 125,000 | \$0.00 | 125,000 | D | |

Explanation of Responses:

1. The stock option will vest in 48 successive equal monthly installments measured from February 8, 2018.

Remarks:

/s/ Michael A. Metzger

03/05/2018

** 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.