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SYNERGY Form 4/A July 17, 201	PHARMACEUT	TICALS, I	INC.										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL			
Check t	his box	Washington, D.C. 20549										3235-0287 January 31,	
if no lor subject Section Form 4	to STATEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							F	Expires: 200 Estimated average burden hours per response 0			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940													
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> Shailubhai Kunwar			2. Issuer Name and Ticker or Trading Symbol SYNERGY PHARMACEUTICALS INC. [SGYP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O SYNERGY PHARMACEUTICALS INC., 420 LEXINGTON AVENUE, SUITE 2012			3. Date of Earliest Transaction (Month/Day/Year) 07/12/2013					Director 10% Owner X Officer (give title Other (specify below) Chief Scientific Officer					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 07/16/2013					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NEW YOF	RK, NY 10170		07/10/2	2013				Form filed b Person					
(City)	(State)	(Zip)	Tal	ole I - Non-l	Derivative	Securitie	es Acqu	iired, Disposed	d of,	or Beneficia	lly Owne	ed	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Se Be Ov Fo Re Tr (Ir	Amount of curities eneficially wned llowing eported ansaction(s) astr. 3 and 4)	Fo (D (I)	Ownership rm: Direct) or Indirect astr. 4)	7. Natur Indirect Benefici Ownersl (Instr. 4)	ial hip	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.													
					inforr	nation co	ontain	nd to the col ed in this for I unless the f	m a	re not	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

number.

displays a currently valid OMB control

1. Title of 2 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative Expiration Date **Underlying Securities** (Month/Day/Year) (Instr. 3 and 4) Security or Exercise any Code Securities (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A) or Derivative Disposed of (D) Security (Instr. 3, 4, and 5) Amount or Date Expiration Title Number of Exercisable Date (D) Code V Shares (A) Stock Common (1) \$4.4 07/12/2013 125,000 07/12/2023 125,000 А Stock Options **Reporting Owners**

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Reporting Owner Name / Address	Relationships					
Reporting Owner France Francess	Director	10% Owner	Officer			
ilubhai Kunwar SYNERGY PHARMACEUTICALS INC. LEXINGTON AVENUE, SUITE 2012 W YORK, NY 10170			Chief Scientific Officer			
onatures						

Signatures

Shai C/O 420 NEV

/s/ Kunwar 07/17/2013 Shailubhai

<u>**</u>Signature of Reporting Person

07/17/2013 Date

Explanation of Responses:

* 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).

(1) 41,667 of the stock options vest on each of 7/12/2014 and 2015 and 41,666 vest on 7/12/2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Other