CHIASMA, INC						
Form 3						
January 04, 2016						
FORM 3	UNITED STAT	OMB APPROVAL				
	Washington, D.C. 20549				3235-0104	
	Expires:	January 31, 2005				
	Estimated average burden hours per					
	response	0.5				
(Print or Type Respon	nses)					
1. Name and Addres Person *	s of Reporting	2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Syn	ıbol		

CHIASMA, INC [CHMA] McCarthy Tara (Month/Day/Year) 01/04/2016 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O CHIASMA, INC., 60 (Check all applicable) WELLS AVENUE, SUITE 102 (Street) 6. Individual or Joint/Group Director 10% Owner _X__Officer _ Other Filing(Check Applicable Line) (give title below) (specify below) _X_ Form filed by One Reporting General Counsel and Secretary Person NEWTON, MAÂ 02459 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1.Title of Security 2. Amount of Securities 3. Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. 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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I)	

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
McCarthy Tara C/O CHIASMA, INC. 60 WELLS AVENUE, SUITE 102 NEWTON, MA 02459	Â	Â	General Counsel and Secretary	Â			
Signatures							
/s/ Mark J. Fitzpatrick, Attorney-in-Fact		1/04/2016					
**Signature of Reporting Person		Date					
Explanation of Responses:							

No securities are beneficially owned

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

Exhibit List: Exhibit 24.1 - Power of Attorney

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.