# FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
MB Number:	3235-0287			
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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Finit of Ty	pe Response	eo,												
I. Name and Address of Reporting Person - Weiland Robert J.  (Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 7999 GATEWAY BLVD., SUITE 130  (Street)  NEWARK, CA 94560  (City) (State) (Zip)			Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [CBAY]     Date of Earliest Transaction (Month/Day/Year) 06/28/2017					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
									re title below)		(specify below)	)		
			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				e)	
			(Zip)	Table I - Non-Derivative Securities Acqui										
1.Title of Security 2. Transaction Date			2A. Deemed Execution Date, if		3. Transaction 4. Securities Acqu		. , .		Securities Beneficially wing Reported		7.	Nature Indirect		
			,	(Month/I	Day/Year)	Code	e V Ar	(A) or (D)	(Ins	(Instr. 3 and 4) Direct (D) or Indirect (I)		r Indirect (In	wnership nstr. 4)	
Reminder:								who respon	nd to the	collection	a of inforn	nation	SEC 14	74 (9-02)
Reminder:							containe form dis	ed in this for splays a curr sed of, or Ben	rm are no rently vali eficially O	ot required id OMB c	d to respo	nd unless th		( )
1. Title of	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. Notion of Deri Secul Acquired (A) of Disp	vative rities uired or osed of r. 3, 4,	containe form dis nired, Dispos options, con	ed in this for splays a currence of, or Ben exertible securicisable and Date	rm are no rently vali eficially O	ot required id OMB of Owned and of ng s	8. Price of	nd unless th	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	tion of Deri Secu Acqu (A) of Disp (D) (Inst	varive rities aired or osed of r. 3, 4, 5)	containe form dis nired, Dispos options, con 6. Date Exe Expiration 1	ed in this for splays a curious action of the second creates and the second creates and the second creates are splayed as a second create and the second creates are splayed as a second create and the second creates are splayed as a second creates a second creates a second creates are splayed as a second creates a second	rm are no rently vali eficially O rities)  7. Title an Amount o Underlyin Securities	ot required id OMB of Owned and of ng s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indire Beneficial Ownersh (Instr. 4)

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Weiland Robert J. C/O CYMABAY THERAPEUTICS, INC. 7999 GATEWAY BLVD., SUITE 130 NEWARK, CA 94560	X				

## **Signatures**

/s/ Sujal Shah, Attorney-in-Fact	06/30/2017
**Signature of Reporting Person	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) The shares subject to the option shall vest in 12 equal monthly installments commencing on June 1, 2017.

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.