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

OMB 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).

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

(Print or Ty	pe Response	s)												
Name and Address of Reporting Person * KIM DENNIS D				2. Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [CBAY]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 7575 GATEWAY BLVD., SUITE 110			3. Date of Earliest Transaction (Month/Day/Year) 01/19/2022					X Officer (give title below) Other (specify below) Chief Medical Officer						
(Street) NEWARK, CA 94560				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		uired	Beneficially Owned Following Reported Transaction(s)		es following	6. Ownership Form:	Beneficial
				(Month/Day/Year)	Code	V Amount (A) or Price		Price	(Instr. 3 and 4)			\ /	Ownership (Instr. 4)	
Common Stock		01/19/2022		P		20,000	1 / /	\$ 3.04	20,000			D		
				Derivative Securit	ies Acquire	the f	orm dis	plays a o	curre: eficial	ntly valid		spond unle trol numbe		
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	3A. Deemed Execution Da any	te, if Transaction Code ('ear) (Instr. 8)	5.	6. Da and I	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti Amo Und Secu	itle and ount of lerlying urities tr. 3 and	Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivating Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)
				Code V	(A) (D)	Date Exer		Expiration Date	Title	or Number of Shares				
Repor	ting O	wners			Dalationsh	•								

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
KIM DENNIS D C/O CYMABAY THERAPEUTICS, INC. 7575 GATEWAY BLVD., SUITE 110 NEWARK, CA 94560			Chief Medical Officer				

Signatures

/s/ Paul Quinlan, as attorney-in-fact for Dennis D. Kim	01/20/2022
**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).

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.