FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
OMB 3235Number: 0287
Expires: November 30, 2011
Estimated average burden hours per response... 0.5

Amount

Number

Shares

21,260

\$0

21,260

D

of

11. Nature of Indirect Beneficial Ownership (Instr. 4)

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, 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 Ty	vne Respon	ses)											
	, pe respon	563)											
1. Name and Address of Reporting Person *- LANGE LOUIS G			2. Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [NONE]			E1 I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner						
(Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 3876 BAY CENTER PLACE			3. Date of Earliest Transaction (Month/Day/Year) 01/06/2014				Officer (give titleOther (specify below)			ow)			
(Street) HAYWARD, CA 94545			4. If Amendment, Date Original Filed(Month/Day/Year)			Α	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	(Zip)		Table I -	Non-Derivat	tive Securities A	Acquir	red, Disposed of, or	Beneficially (Owned			
1.Title of S (Instr. 3)	1	2. Transaction Date (Month/Day/Year)	Exect any		Code	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 3)	or (5) 1 5) 1	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect	Benefici Owners	ect ial ship		
					Code V	Amount (D)	Price	(Instr. 3 and 4)	(I) (Instr. 4)				
Reminder: directly or		a separate line for e	ach cl	ass of securitie	Pe	Amount (D) I	Price esponentaine	(Instr. 3 and 4) Id to the collection d in this form are unless the form di control number.	(Instr. 4)	SEC 14 (9-	474 -02)		
		Table II - 1	Deriva	ative Securitie	Pe int re cu	Amount (D) I	esponentaine cond u	d to the collection d in this form are unless the form di control number.	(Instr. 4)				
	indirectly.	Table II - 1	Deriva e.g., p	ative Securitie	Pe int re cu	Amount (D) I	esponentaine pond u	d to the collection d in this form are unless the form di control number. eficially Owned ities)	of not splays a	(9-	-02)	9. Number of	10.

Date

Exercisable

(1)

Expiration

01/06/2024

Title

Common

Stock

Reporting Owners

\$5

Denouting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LANGE LOUIS G						
C/O CYMABAY THERAPEUTICS, INC.	X					
3876 BAY CENTER PLACE	Λ					
HAYWARD, CA 94545						

Signatures

Stock Option

buy)

(right to

/s/ Sujal Shah, by power of attorney	01/08/2014
Signature of Reporting Person	Date

01/06/2014

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).

Code

A

(A)

21,260

(1) This option vests over a four-year period, with one-third of the shares subject to the Option vesting on the grant date of January 6, 2014, and the remaining 2/3 of the shares subject to the Option vesting ratably on a monthly basis over the next 48 months.

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.