# FORM 4

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

OMB APPROVAL						
OMB Number:	3235-028	7				
Estimated average burden						
nours per response	e 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	es)															
Name and Address of Reporting Person   McWherter Charles				2. Issuer Name <b>and</b> 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., 7999 GATEWAY BLVD, SUITE 130				~ ~	3. Date of Earliest Transaction (Month/Day/Year) 04/15/2016							X Officer (give title below) Other (specify below)  Sr. Vice President					
(Street) NEWARK, CA 94560			4. 1	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 Acquired, Disposed of, or Beneficially Owned												
1.Title of S (Instr. 3)	Instr. 3) Dat		2. Transaction Date (Month/Day/Yea	Exe ar) any	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership Form: Direct (D)	Beneficial Ownership			
							Code	V	Amoun	(A) o	r Price	ce			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		04/15/2016				P		3,000	A	\$ 1.68	5,000			D		
			Table II				es Acquire	the f d, Di	orm dis	splays of, or B	a curi enefici	rently validately of the contract of the contr	d OMB co	espond un ntrol numb		02)	
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day)	Year) Execution any	ed Date, i	4. Transaction Code Year) (Instr. 8)		5. Number of	and Expiration Date (Month/Day/Year) Am Un. Sec		Title and mount of nderlying curities nstr. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owners Form o  y Derivat Securit Direct ( or India	Ownershi y: (Instr. 4)			
					Code	V	(A) (D)	Date Exe	e rcisable	Expirat Date	ion Ti	Amount or Number of Shares					
Repor	ting O	wners										_		_			
D	orting O	or Name / A	ddross			Rela	tionships										
Reporting Owner Name / Address Direct			rector	10% Owi	ner	Officer		(	Other								
	er Charles	HED A DELL	TICS INC														

## **Signatures**

NEWARK, CA 94560

/s/ Sujal Shah, by power of attorney	04/18/2016
**Signature of Reporting Person	Date

### **Explanation of Responses:**

7999 GATEWAY BLVD, SUITE 130

- \* 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.

Sr. Vice President

