FORM 4

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

OMB APPRO	VAL
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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

\ JI	e Responses)													
1. Name and Address of Reporting Person - Van Wart Harold (Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 7999 GATEWAY BLVD, SUITE 130				Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [CBAY] Date of Earliest Transaction (Month/Day/Year) 01/04/2017							lationship		ng Person(s) t c all applicabl		
											X Officer (give title below) Other (specify below) President and CEO				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
NEWARK, CA 94560 (City) (State) (Zip)				Table I - Non-Derivative Securities Acon							ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		Date (Month/Day/Year)		3. Trans Code (Instr. 8		saction 4. Se (A) (Inst	ecurities Acqui or Disposed of r. 3, 4 and 5)	red 5. Am (D) Owne Trans	5. Amount of Securities Benefic Owned Following Reported Transaction(s) (Instr. 3 and 4)		eneficially (d	Ownership of Form:	Beneficial Ownership		
Reminder: F	Report on a so	eparate line for each	class of securities	beneficial	ly ov	wned dire	ectly	Persons contained	who respond I in this form lays a curre	are not r	equired	to respon	d unless the		474 (9-02)
			(ls, warra	nts,	options, conv	d of, or Benef ertible securit	ies)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	, call	ls, warra 5. Numb	per ve es d		ertible securit isable and ite		1		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact	, call	s, warra 5. Numb of Derivatir Securitie Acquiree (A) or Disposee (D) (Instr. 3, and 5)	per ve es d	options, conv 6. Date Exerc Expiration Da	ertible securit isable and ite	7. Title and Amount of Underlying Securities	1	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction(Ownershi Form of Derivativ Security: Direct (D or Indirects)	of Indirec Beneficial Ownershi (Instr. 4)

Reporting Owners

Reporting Owner Name / Address	Relationships					
reporting 6 where realized	Director	10% Owner	Officer	Other		
Van Wart Harold C/O CYMABAY THERAPEUTICS, INC. 7999 GATEWAY BLVD, SUITE 130 NEWARK, CA 94560	X		President and CEO			

Signatures

/s/ Sujal Shah, by power of attorney	01/06/2017
**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).
- On July 25, 2016, the Reporting Person was granted an option to purchase 100,000 shares of common stock of the Issuer. The option vests in two equal installments based on the (1) Issuer's achieving certain milestones. The first milestone was met on December 30, 2016, resulting in vesting of the option as to 50,000 shares, which was reported on a prior Form 4. The second milestone was met on January 4, 2017, resulting in vesting of the option as to the remaining 50,000 shares.

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.