FORM	4
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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).

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

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### 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 Type Response	es)												
1. Name and Address of Reporting Person – STEIN EVAN A.			2. Issuer Name <b>an</b> CymaBay Therap			0.2	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner					
(Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 7999 GATEWAY BLVD., SUITE 130			3. Date of Earliest Transaction (Month/Day/Year) 01/19/2017							ther (specify belo	ow)		
(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 Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acq						uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			Execution Date, if	3. Transact Code (Instr. 8)	-	(A) or Disposed of (D)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership	7. Nature of Indirect Beneficial		
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	X	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number 6. Da		6. Date Exer	6. Date Exercisable and		7. Title and		9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		Expiration I	Date	Amount of Der		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Derivati	ve	(Month/Day	/Year)	Underlying S		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	)	Securitie	es			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquire	d	(Ins		(Instr. 3 and 4)				2	(Instr. 4)
	Security					(A) or					0	Direct (D)			
						Dispose	d of					1	or Indirect		
						(D) (Insta 2	4					Transaction(s) (Instr. 4)	· /		
						(Instr. 3, and 5)	4,					(111501. 4)	(Instr. 4)		
						and 5)									
											Amount				
									Expiration	Title	or Number				
								Exercisable	Date		of				
				Code	v	(A)	(D)				Shares				
Stock Option (right to	\$ 1.72	01/19/2017		A		12,000			01/18/2027	Common Stock		\$ 0	12,000	D	
buy)															

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STEIN EVAN A. C/O CYMABAY THERAPEUTICS, INC. 7999 GATEWAY BLVD., SUITE 130 NEWARK, CA 94560	Х							

## Signatures

/s/ Sujal Shah, by power of attorney	01/23/2017
**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 option vests in three annual installments from the vesting start date of January 19, 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.