FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours per respon-	se 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)														
1. Name and Address of Reporting Person *				2. I	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer					
Wills Robert James			Cyn	CymaBay Therapeutics, Inc. [CBAY]						(Check all applicable) X Director 10% Owner						
	ABAY T	(First) HERAPEU EVARD, SI	rics, inc., 799 UITE 130		te of Earlies 1/2017	t Trans	actio	n (M	Ionth/Da	y/Year)		Office	er (give title belo	ow)	Other (specify	below)
(Street)			4. If	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						
NEWARK, CA 94560 (City) (State) (Zip)				roun med by wrote than one Reporting Person												
(City	,	(State)	(Zip)			ble I -	Non-	Deri	ivative S	ecuritie	s Acqu		ired, Disposed of, or Beneficially Owned			
(Instr. 3) Date		2. Transaction Date (Month/Day/Yea	Execu any	Deemed attion Date, if the	(Instr. 8)		tion	4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)			Following	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(111011	uu Duyr 1 cui	Co	de	V	Amoun	(A) or (D)	or (I)		or Indirect (I) (Instr. 4)	(Instr. 4)		
Common	Stock		08/01/2017			P)		200	A	\$ 6.829	25,200			D	
Common	Stock		08/01/2017			P)		300	A	\$ 6.838	25,500			D	
Common	Stock		08/01/2017			P	•		1,000	A	\$ 6.839	26,500			D	
Common Stock 08/01/2017					•		3,500	A	\$ 6.847	30,000			D			
Reminder: indirectly.	Report on a	separate line f	for each class of se	curities	beneficially	owned	direc	tly o	r							
								cont	ained i	n this f	orm ar	e not req	ection of ir uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
			Table II ·		tive Securit								i			
1. Title of 2. 3. Transaction 3A. Deemed 4.						5. Number 6. Date Exercisable 7.				Title and 8. Price of 9. Number of 1				11. Nature		
	Conversion		Execution	Date, if	Transaction Code		ative ities red sed 3,	and Expiration Date (Month/Day/Year) Ar Ur Se (In 4)		Am Und Sec (Ins	ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owners Form o y Derivat Security Direct (or Indir	hip of Indirect Beneficial over Ownership (Instr. 4) D)	
					Code V	(A)	(D)	Date Exe	e rcisable	Expirati Date	ion Titl	Amount or e Number of Shares				

Reporting Owners

Post of Community (Addison	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Wills Robert James C/O CYMABAY THERAPEUTICS, INC. 7999 GATEWAY BOULEVARD, SUITE 130 NEWARK, CA 94560	X					

Signatures

/s/ Sujal Shah, Attorney-in-Fact	08/01/2017
**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).

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.