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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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474 (9-02)

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 Responses	s)										
1. Name and Address of Shah Sujal		2. Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [CBAY]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director			
(Last) C/O CYMABAY TH GATEWAY BOULE	INC., 7999	3. Date of Earliest Transaction (Month/Day/Year) 10/27/2017					X_Officer (give title below) Other (specify below) President & CEO				
NEWARK, CA 9456		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 Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code(A) or Disposed of (D)(Instr. 8)(Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	Beneficial			
			(Code	v	Amount	(A) or (D)	Price	× /	or Indirect (I) (Instr. 4)	1

Reminder: Report on a separate line for each class of securities beneficially owned directly or ind	directly.	
	ersons who re ontained in this	

ons who respond to the collection of information	SEC 1
ained in this form are not required to respond unless the	
displays a currently valid OMB control number.	

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

form

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	r of	6. Date Exer	rcisable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Derivative	e	Expiration I	Date	of Underly	ing	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Securities		(Month/Day	/Year)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	str. 8) Acquired (A) (I		(Instr. 3 and 4) (Instr. 5)		Beneficially	Derivative	Ownership				
	Derivative					or Dispos	ed					Security:	(Instr. 4)		
	Security					of (D)							0	Direct (D)	
						(Instr. 3, 4	Ι,						1	or Indirect	
						and 5)	-		1				Transaction(s)	< / <	
											Amount		(Instr. 4)	(Instr. 4)	
									Expiration	Title	or				
				C 1	* 7			Exercisable	Date		Number				
				Code	V	(A)	(D)				of Shares				
Stock Option (right to buy)	\$ 9.21	10/27/2017		А		640,000		<u>(1)</u>	10/26/2027	Common Stock	640,000	\$ 0	640,000	D	

Reporting Owners

Den están a Orman Nama (Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Shah Sujal C/O CYMABAY THERAPEUTICS, INC. 7999 GATEWAY BOULEVARD, SUITE 130 NEWARK, CA 94560	х		President & CEO				

Signatures

/s/ Sujal Shah	10/31/2017
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 shares subject to the option shall vest in 48 equal monthly installments commencing on October 27, 2017, subject to the Reporting Person's continuous service to the Issuer as of each such date.

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.