FORM 4

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

OMB APPROVAL
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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).

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	s)														
1. Name and Address of Reporting Person * 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 10% Owner					
(Last) (First) (Middle) C/O CYMABAY THERAPEUTICS, INC., 7575 GATEWAY BOULEVARD, SUITE 110				3. Date of Earliest Transaction (Month/Day/Year) 09/20/2019						X Officer (give title below) Other (specify below) Chief Executive Officer						
(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)		T	able I	- Non	-Der	ivative S	Securities	s Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year		if Code (Instr. 8)		(A) or Disposed o (Instr. 3, 4 and 5)		of (D)	Beneficia	cially Owned Following ted Transaction(s) 3 and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						С	ode	V	Amoun	(A) or (D)	Price				(I) (Instr. 4)	
Common	Stock		09/20/2019				P		1,900	A	\$ 5.5	111,900)		D	
Common Stock 09/23/2019		09/23/2019				P		3,100	A	\$ 5.55	115,000	115,000		D		
Reminder:	Report on a s	separate line fo	or each class of secur	ities benefi	cially o	wned		Pers cont	ons whained i	no respo n this fo	rm are	e not requ		formation spond unle trol numbe	ss	1474 (9-02)
			Table II - l	Derivative a			-					•				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Date, if Transa		saction	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Title and ount of derlying urities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	Beneficia Ownershi (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exer	e rcisable	Expiration Date	n Titl	Amount or e Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Shah Sujal C/O CYMABAY THERAPEUTICS, INC. 7575 GATEWAY BOULEVARD, SUITE 110 NEWARK, CA 94560	X		Chief Executive Officer			

Signatures

/s/ Sujal Shah	09/23/2019
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**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.