## FORM 4

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

OMB APPE	ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	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

I. Name and Address of Reporting Person* Dorling Janet  (Last) (First) (Middle)  C/O CYMABAY THERAPEUTICS, INC., 7575  GATEWAY BOULEVARD, SUITE 110			2. Issuer Name and Ticker or Trading Symbol CymaBay Therapeutics, Inc. [CBAY]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
			S, INC., 7575	3. Date of Earliest Transaction (Month/Day/Year) 04/05/2021						Officer (give title below) Other (specify below)				)	
(Street) NEWARK, CA 94560			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				)		
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					ed						
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	Execution Date, if		ear)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)  (A) or Amount (D) Price		Owned Following Reported Transaction(s) (Instr. 3 and 4)		ed OF	Ownership orm: Birect (D) Cr Indirect (I	. Nature f Indirect deneficial Ownership (Instr. 4)
			Table II -				Acquire	displays	orm are not ro s a currently v sed of, or Bene avertible securi	valid OMB	control n		e iorm		
Security	Conversion or Exercise Price of	(Month/Day/Year) f tive		Code Securities			ive Exp (Mo	Expiration Date of Un (Month/Day/Year) Secur		of Underlyi Securities	derlying Derivativ		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownershi Form of	(Instr. 4)
(Instr. 3)	Derivative Security				of (Ir	(D) str. 3, 4				(msir. 5 und	. 1)	(msu. 3)	Owned Following Reported	Security: Direct (D or Indirec	Ownersh (Instr. 4)
(Instr. 3)				Code	of (Ir an	(D) sstr. 3, 4 d 5)	, Dat	te ercisable	Expiration Date	Title	Amount or Number of Shares	(msu. 3)	Owned Following Reported	Security: Direct (D or Indirec	Ownersh (Instr. 4)

#### **Reporting Owners**

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

### **Signatures**

/s/ Paul Quinlan, as attorney-in-fact for Janet Dorling	04/05/2021
**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 as to 1/36 of the underlying shares monthly from April 5, 2021.

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.