FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STA
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Shukla Sanjay  (Last) (First) (Middle)  3545 JOHN HOPKINS COURT, SUITE #250						Issuer Name and Ticker or Trading Symbol aTYR PHARMA INC [ LIFE ]      Date of Earliest Transaction (Month/Day/Year) 09/13/2016									ationship of Reporting Pe k all applicable) Director Officer (give title below) Chief Medica			er ner secify
(Street) SAN DII (City)			92121 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
			ole I - Noi	n-Deriv	/ative	e Se	curities	s Ac	· ·	Disp				ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)			Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									v	Amount	(A) or (D)	Price	Transact (Instr. 3	tion(s)			, ,,	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day/	Date,	4. Transa Code (I 8)		of		6. Date Exe Expiration (Month/Day	Date	of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		expiration vate	Title	Amount or Number of Shares					
Employee Stock Option (right to	\$3.06	09/13/2016			A		27,500		(1)	0	9/13/2026	Common Stock	27,500	\$0.00	27,50	0	D	

## **Explanation of Responses:**

1. The shares subject to this option shall vest and become exercisable in 48 equal monthly installments beginning October 13, 2016, such that this option will be fully exercisable on September 13, 2020. This option is subject to accelerated vesting upon termination without cause upon change of control of the issuer.

## Remarks:

Nancy D. Krueger, attorney-infact

09/15/2016

\*\* Signature of Reporting Person

Date

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

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.