FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP                           |
|--|--|
| Section 16. Form 4 or Form 5           |  |
| obligations may continue. See          |  |
| Instruction 1(b).                      | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

**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

| Name and Address of Reporting Person*     Matsuoka Grove      |  |  |  |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>aTYR PHARMA INC</u> [ LIFE ] |   |                   |           |  |  |               |                            |  | Relationship<br>eck all appli<br>Directo            | cable)   | g Pers         | son(s) to Issi<br>10% Ow<br>Other (s                              | ner                                   |
|---|--|--|--|--|--|---|-------------------|-----------|--|--|---------------|----------------------------|--|---|--|----------------|---|---------------------------------------|
| (Last)<br>3545 JOI  | (Last) (First) (Middle)<br>3545 JOHN HOPKINS COURT, SUITE #250   |  |  |  |  |   | f Earliest<br>016 | Trans     | action (Mont                                 | h/Day/`  | Year)         |                            | X Officer (give title Other (specify below)  See Remarks   |   |  |                |   |                                       |
| (Street) SAN DIEGO CA 92121 (City) (State) (Zip)              |  |  |  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |   |                   |           |  |  |               |                            | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |  |                |   |                                       |
|   |  | Tab  | le I - Non-  | Deriva   | tive   | Sec   | curities          | s Ac      | quired, D                                    | ispos  | sed o         | f, or Bei                  | neficial   | y Owned   | <u> </u>   |                |   |                                       |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |  |  |  | ar) E  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                   | Code (Ins | on Dis                                       | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |               |                            | Benefici   | es<br>ally<br>Following                             | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |                | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                       |
|   |  |  |  |  |  |   |                   |           | Code V                                       | An   | nount         | (A) or<br>(D)              | Price  | Transaci<br>(Instr. 3                               | ion(s)   |                |   | 11150.4)                              |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |  |  |   |                   |           |  |  |               |                            |  |   |  |                |   |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Da<br>if any<br>(Month/Day/Y | Co   | Transact<br>Code (In   |   |                   |           | 6. Date Exerc<br>Expiration D<br>(Month/Day/ | ate  | of Securities |                            | ies<br>g<br>Security   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number or<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(<br>(Instr. 4) | e<br>s<br>Illy | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |  | Co   | ode V  |   | (A)               | (D)       | Date<br>Exercisable                          | Expira<br>Date   | ation         | Amount or Number of Shares |  |   |  |                |   |                                       |
| Employee<br>Stock<br>Option<br>(right to                      | \$3.06   | 09/13/2016                                 |  | I  | A  |   | 20,000            |           | (1)  | 09/13  | 3/2026        | Common<br>Stock            | 20,000   | \$0.00  | 20,00  | 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:

Senior Vice President, Product Programs and Planning

Nancy D. Krueger, attorney-in-09/15/2016 **fact** 

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.