FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	ourden							

0.5

hours per response:

Check this box if no longer subject to 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 or Section 30(h) of the Investment Company Act of 1940

							. ,				' '								
1. Name and Address of Reporting Person* SCHIMMEL PAUL					2. Issuer Name and Ticker or Trading Symbol aTYR PHARMA INC [LIFE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SCHIMIMEL PAUL													X	Dire	ctor		10% (Owner	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/26/2018									Offic belo	er (give title w)	•	Other below	(specify)		
3545 JOI	IN HOPKI	NS COURT, SU	ITE #2	250															
,				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)									3			, ,		Line)				3 (.,
SAN DIE	GO CA	1 9	92121											X	Forr	n filed by O	ne Re	porting Pers	son
					.											n filed by M	ore th	an One Rep	orting
(City)	(C+	ate) (Zin)												Pers	son			
(City)	(31	ale) (.	Zip)																
		Tabl	e I - N	اon-Deri،	ative/	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or B	enefic	cially	/ Own	ed			
Da			2. Transact Date (Month/Day		Execution Date,		,				Securities Acquired (A) or posed Of (D) (Instr. 3, 4 an		Beneficially Owned Following		ies cially Following	Form (D) o	n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reporte Transa (Instr. 3	ction(s)			(Instr. 4)
Common Stock														40),440		D		
Common Stock 1			11/26/2	018				P		147,225	A	\$0.5	42(1) 882		82,302		T I	See Footnote ⁽²⁾	
Common Stock													72	1,814			See Footnote ⁽³⁾		
		Та	ıble II								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	reivative ecurity nstr. 3) Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Execution Date, (if any (Month/Day/Year)		4. Transa Code (8)		of Deriv Secu Acqu (A) or Dispo	ivative (Month/Day urities upired or posed D) tr. 3, 4			Year) Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of		Derivative Security (Instr. 5) Henefic Owned Following Report Transa (Instr. 4)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. Represents weighted average price for the shares. The shares were purchased at price ranging from \$0.5404 to \$0.5422 per share. The reporting person will provide to the Securities and Exchange Commission staff, the issuer, or any security holder of the issuer, upon request, full information regarding the number of shares purchased at each separate price.
- 2. These shares are owned directly by Paul Schimmel Prototype PSP, Paul Schimmel Trustee, FBO Paul Schimmel. The Reporting Person is the sole owner of the Paul Schimmel Prototype PSP, Paul Schimmel Trustee, FBO Paul Schimmel.
- 3. There shares are owned directly by Schimmel Revocable Trust U/A Dtd 9/6/2000. The Reporting Person and his spouse are trustees of the Schimmel Revocable Trust U/A Dtd 9/6/2000.

Remarks:

Nancy D. Krueger, Attorney-11/28/2018 in-Fact

** 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.