

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

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* <u>Amanullah Ashraf</u> _____ (Last) (First) (Middle) 3545 JOHN HOPKINS COURT, SUITE #250 _____ (Street) SAN DIEGO CA 92121 _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol aTYR PHARMA INC [LIFE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) See Remarks
	3. Date of Earliest Transaction (Month/Day/Year) 02/06/2018	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/07/2018		M ⁽¹⁾		3,334	A	\$0.00	3,334	D	
Common Stock	02/08/2018		S ⁽²⁾		1,402	D	\$3.4	1,932	D	

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Employee Stock Option (right to buy)	\$3.3	02/06/2018		A		100,000		(3)	02/06/2028	Common Stock	100,000	\$0.00	100,000	D	
Restricted Stock Units	\$0.00	02/07/2018		M ⁽¹⁾			3,334	(4)	(4)	Common Stock	3,334	\$0.00	6,666	D	

Explanation of Responses:

- Represents shares acquired upon the vesting of restricted stock units (RSUs) granted to the Reporting Person on February 7, 2017.
- Sale made by the Reporting Person in compliance with the provisions of Rule 10b5-1 to satisfy tax withholding obligations in connection with the partial vesting of RSUs granted on February 7, 2017.
- The shares subject to this option shall vest and become exercisable in 48 equal monthly installments beginning March 6, 2018, such that this option will be fully exercisable on February 6, 2022. This option is subject to accelerated vesting upon termination without cause upon change of control of the issuer.
- The RSU grant vests as to one-third (1/3) of the total number of units on each one year anniversary of the grant commencing on February 7, 2018.

Remarks:

Senior Vice President, Biologics Development and Manufacturing

Nancy D. Krueger, Attorney- 02/08/2018
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.