FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL													
	OMB Number:			3235-028										
- 1	1 =													

	Check this box if no longer subject to						
$\neg$	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

37 Estimated average burden 0.5 hours per response:

								Investment									
1. Name and Address of Reporting Person*  Ravindran Sanuj K.					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>aTYR PHARMA INC</u> [ LIFE ]								Relationship o eck all applic Directo	,		on(s) to Issu 10% Ow	
(Last) 3545 JO	`	irst) NS COURT, SU	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/04/2016								helow)	(give title Chief Business		Other (specify below)  Officer	
(Street) SAN DIEGO CA 92121 (City) (State) (Zip)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. I Lin	e) X Form fi Form fi	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Ta	ble I - Non-D	Derivati	ve Se	ecurities	s Ac	quired, I	Dis	posed o	of, or Be	neficial	y Owned				
Date			Transaction	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) obsposed Of (D) (Instr. 3, 4)				5. Amour Securitie Beneficia Owned F Reported	s Formulay (D) (I) (I)		Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)			
							Code	v	Amount	(A) o (D)	Price	Transacti	eported ansaction(s) estr. 3 and 4)			instr. 4)	
			Table II - De (e.					uired, Di , option					Owned				
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.		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 Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)		Date Exercisable		expiration Pate	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Employee Stock Option (right to buy)	\$9.13	01/04/2016		A		153,000		(1)	0	1/04/2026	Common Stock	153,000	\$0.00	153,00	00	D	

## **Explanation of Responses:**

\$9.13

1. 1/4th of the shares subject to this option shall vest and become exercisable on January 4, 2017 and the remaining shares subject to this option shall vest and become exercisable in 36 equal monthly installments, such that this option is fully exercisable on January 4, 2020. This option is subject to accelerated vesting upon termination without cause upon a change of control of the Issuer.

(2)

(2)

2. The shares subject to this option shall vest and become exercisable, if at all, in 48 equal monthly installments upon the achievement of certain performance goals, which must be achieved by January 4, 2018, or such option will be subject to immediate forfeiture. This option is subject to accelerated vesting upon termination without cause upon a change of control of the issuer.

## Remarks:

Employee Stock Option

(right to buy)

> /s/ Nancy Krueger, as Power of Attorney

10,750

Stock

\$0.00

01/06/2016

10,750

D

\*\* 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).

01/04/2016

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.

10,750