FORM 4

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

Washington,	DC	20549	
vasiliigton,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average	burden									
hours per response	. 0.5									

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 ]								telationship eck all appli X Directo	cable)	p Perso	on(s) to Iss 10% Ow		
(Last)	(Fi	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023								Officer below)	(give title		Other (s below)	pecify	
C/O ATYR PHARMA, INC. 10240 SORRENTO VALLEY ROAD, SUITE 300					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person					
(Street) SAN DIEGO CA 92121												Form filed by More than One Reporting Person						
(City) (State) (Zip) Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In:									ant to a con ee Instruction	on 10.		plan th	at is intende	d to				
1. Title of Security (Instr. 3) 2. Transac Date			Transaction	ction 2A. Deemed Execution Date,		3. Transaction	3. 4. Secur Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a		5. Amou Securitie Benefici	nt of es ally -ollowing	Form:	Direct Endirect Etr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	ınt (A) or (D)		Transac (Instr. 3	tion(s)					
		Т	able II - De e.ز(e.ز					uired, Dis s, options					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	late   Execution Date, if any (Month/Day/Year)   Month/Day/Year)     Transaction of Code (Instr. 8)   Se Add (ADi of (Instr. ADD)		of Derivati Securiti Acquire (A) or Dispose of (D)	Derivative Securities Underlying Acquired (A) or Disposed of (D) (Instr. 3, 4				of S g Security	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)	Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Exp Dat	oiration e	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$2.52	05/17/2023		A		12,000		(1)	05/	17/2033	Common Stock	12,000	\$0.00	12,000		D		

## **Explanation of Responses:**

1. The option, granted pursuant to the Issuer's non-employee director compensation policy, vests in full on the earlier of (i) May 17, 2024 or (ii) the Issuer's 2024 Annual Meeting of Stockholders, subject to the Reporting Person's continued service on the Board of Directors.

## Remarks:

/s/ Nancy E. Denyes, as Attorney-in-Fact

05/19/2023

\*\* 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.