FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type	e Responses)														
1. Name and Address of Reporting Person * MOLINA ARTURO MD			:	2. Issuer Name and Ticker or Trading Symbol SUTRO BIOPHARMA, INC. [STRO]						5. R	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
C/O SUTRO BIOPHARMA, INC., 310 UTAH AVENUE, SUITE 150 (Street) SOUTH SAN FRANCISCO, CA 94080			10 TITLE I	3. Date of Earliest Transaction (Month/Day/Year) 03/05/2021						X	X Officer (give title below) Other (specify below) Chief Medical Officer				
			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acqu						s Acquired,	ired, Disposed of, or Beneficially Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			Execution Date, if any (Month/Day/Year)				(A (Ir	(A) or Disposed of (D) (Instr. 3, 4 and 5)		Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership o Born: Direct (D)	. Nature f Indirect deneficial dwnership (nstr. 4)	
Reminder: Ro	eport on a sep	parate line for each o						Persons in this fo a curren	who respond orm are not re tly valid OMB	equired to a s control n	respond i umber.				174 (9-02)
1 77'4 6	la .	la m		(e.g., put		lls, warra	ants,	options, con	vertible securi	ties)		lo p : _ c	0.37 1	c 10	1,, ,,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	if Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Date of (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirects (I)	(Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy Common Stock)	\$ 21.11	03/05/2021		A		60,000		(1)	03/04/2031	Common Stock	60,000	\$ 0	60,000	D	
Restricted Stock Unit (RSU)	(2)	03/05/2021		A		50,000		(3)	03/05/2025	Common Stock	50,000	\$ 0	50,000	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
MOLINA ARTURO MD C/O SUTRO BIOPHARMA, INC. 310 UTAH AVENUE, SUITE 150 SOUTH SAN FRANCISCO, CA 94080			Chief Medical Officer			

Signatures

/s/ Edward C. Albini as attorney-in-fact for Arturo Molina	03/08/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The option vests as to 2.0833% of the total shares monthly, beginning on April 5, 2021, with 100% of the total shares vested and exercisable on March 5, 2025, subject to the reporting person's provision of service to the issuer on each vesting date.
- (2) Each RSU represents a contingent right to receive one (1) share of the issuer's Common Stock upon settlement.
- (3) The RSUs vest as to 1/4th of the total shares annually beginning on March 5, 2022, subject to continued service through each vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.