Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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 ar Cunnin					ker or Tradir Deutics,]			(Che	ck all applic	ionship of Reporting I all applicable) Director		10% Ow	ner						
(Last) (First) (Middle) CO/VISTAGEN THERAPEUTICS, INC.						Date o		Trans	saction (Mor	nth/D	ay/Year)		Officer below)	(give title		Other (s below)	pecify		
343 ALL	ERTON A	VENUE	L						44 4/5		6. Individual or Joint/Group Filing (Check Applicable								
(Street) SOUTH FRANCI	- C	A	94080		- 4.1	Line) X Forr							Form fi	filed by One Reporting Person filed by More than One Reporting					
(City)	(S	state)	(Zip)																
		Tab	le I - Non	-Deriv	vativ	e Se	curities	s Ac	quired, [Disp	osed o	f, or B	enefi	cially	/ Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear) i	A. Deemed xecution Date, any Month/Day/Year		Code (In		rities Acquired (A) ed Of (D) (Instr. 3, 4			Securitie Beneficia Owned F	Securities Form Beneficially (D)		m: Direct or Indirect Bristr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	Code V Amount		(A) (D)	(A) or (D) Price						Transact
		-	Table II - [uired, Di , options						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 D if any (Month/Day/	ate,	4. Transaction Code (Instr 8)				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)
				Cod	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or	ount mber ires					
Stock Option (Right to	\$1.74	01/10/2019			A		25,000		(1)	0	1/10/2029	Commor Stock	25,	,000	\$0	25,000		D	

Explanation of Responses:

1. The stock option reported herein will vest ratably, on a monthly basis, beginning on the date of issuance until March 31, 2019.

/s/ Jerrold D. Dotson, Attorney-01/14/2019 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.