FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

.C. 20549	OMB API	OMB APPROVAL				
DENEEICIAI OWNEDCHID	OMB Number:	3235-0287				

hours per response:

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 33
Estimated average burden

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person*     Anderson Cynthia Lynn					2. Issuer Name and Ticker or Trading Symbol Vistagen Therapeutics, Inc. [ VTGN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) C/O VISTAGEN THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 08/21/2023								X Officer (give title below) Other (steel)  CHIEF FINANCIAL OFFICE				
343 ALLERTON AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SOUTH FRANCE	<i>C</i>	A	94080											filed by More	Reporting Perso		
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is in satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						an that is intende	ed to					
		Tab	le I - Non	-Deriv	ative	Sec	curitie	s Ac	quired, D	isposed	of, or Be	eneficia	lly Owned	t			
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Ins	rities Acquired (A) or ed Of (D) (Instr. 3, 4 a		Benefici Owned I	es F ally (I Following (I	orm: Direct D) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	Amoun	t (A) (D)	Price	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)		
		T							uired, Dis s, options				/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date if any (Month/Day/Yea	Date,	Code (Inst				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)	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	Amount or Number of Shares					
Stock Option (right to	\$5.34	08/21/2023			A		8,333		(1)	08/21/2033	Common Stock	8,333	\$0 <sup>(2)</sup>	8,333	D		

## Explanation of Responses:

- 1. 25% of the stock options vest on August 21, 2024 (the "Vesting Start Date") and 1/36th of the remaining number of shares vest monthly thereafter until all awarded shares are fully vested three (3) years after the Vesting Start Date.
- 2. The stock options were granted in connection with the Reporting Person's appointment as Chief Financial Officer and pursuant to the Issuer's 2019 Omnibus Equity Incentive Plan.

/s/ Cynthia L. Anderson

08/23/2023 Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.