SEC	Form	4
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FORM 4	4
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## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

(	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEME	OMB Number: 32 Estimated average burden hours per response:				
_	Instruction 1(b).	Filed	L				
	1. Name and Address of Reporting Person* DOTSON JERROLD DUANE		2. Issuer Name <b>and</b> Ticker or Trading Symbol VistaGen Therapeutics, Inc. [VSTA]	(Check a	onship of Re Il applicable Director	porting Perso )	n(s) to Issuer 10% Owne
					Officer (give below)	e title	Other (spe below)
	(Last)(First)(MirC/O VISTAGEN THERAPEUTICS, IN343 ALLERTON AVENUE	ddle) C.	3. Date of Earliest Transaction (Month/Day/Year) 09/02/2015		CFO A	ND SECRI	ETARY

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

10% Owner

									X	Officer (give title below)	Other below	(specify
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)						,	SECRETARY	´
C/O VISTAGEN	THERAPEUTIC	S, INC.	09/02/	/2015								
343 ALLERTON	I AVENUE											
(Street)			4. If An	nendment, Date of C	Driginal	Filed (	Month/Day/Ye	ar)	6. Indiv Line)	vidual or Joint/Group	Filing (Check A	pplicable
SOUTH SAN	CA	94080							X	Form filed by One	e Reporting Pers	on
FRANCISCO		51000								Form filed by Mor Person	e than One Rep	orting
(City)	(State)	(Zip)										
	Т	able I - Nor	n-Derivative S	ecurities Acq	uired,	Disp	oosed of, o	r Bene	ficially	Owned		
D		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A   Transaction Disposed Of (D) (Instr. 3,   Code (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
		Table II	Dorivativo So	curities Acqui	rod D	lieno	sed of or	Ronofi		wheel		

erivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transa Code ( 8)		Derivative		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	10. 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		Transaction(s) (Instr. 4)		
Warrant for Common Stock	\$9.25	09/02/2015		A		100,000		09/02/2015	09/02/2020	Common Stock	100,000	\$0	100,000	D	

Explanation of Responses:

/s/ Jerrold Dotson

09/0<u>3/2015</u>

Date

\*\* Signature of Reporting Person

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.