FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average b	ourden
nours 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

 $\label{eq:Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment \\ Company Act of 1940$

1 Nome or	rpe Response		*	2 Ice	ner N	Vame and	Ticker or	Frading Syn	phol	5. Re	lationship c	f Reporting	Person(s) to	Issuer		
I. Name ar Smith Ma		f Reporting Person						i rading Syn . [VTGN]	1001		Director		all applicable			
		(First) HERAPEUTICS,	(Middle) INC., 343								(specify below)					
TIEEERI	OIVIIVE	(Street)		4. If A	meno	dment, Da	te Original	Filed(Month/	Day/Year)	6. Ind	6. Individual or Joint/Group Filing(Check Applicable Line)					
SOUTH	SAN FRAI	NCISCO, CA 940	080									e Reporting Per re than One Re				
(Cir		(State)	(Zip)			7	Γable I - N	on-Derivati	ive Securities A	Acquired, I	Disposed of	f. or Benefi	cially Owned	 [
1.Title of S	Security		2. Transaction	2A.	Deer		3. Transac		curities Acquir			curities Ben			. Nature	
(Instr. 3)	·		Date (Month/Day/Ye		cutio	n Date, if	Code (Instr. 8)		or Disposed of r. 3, 4 and 5)	. /	d Following action(s)	g Reported		Ownership of B	f Indirect Seneficial	
			(Monan Bay) 10		nth/I	Day/Year)	(111541.0)	(Inst			3 and 4)]	Direct (D)	wnership	
							Code	V Amo	ount (A) or (D)	rice			(or Indirect (I (I) (Instr. 4)	instr. 4)	
Reminder:	Report on a	separate line for eac	h class of securities	benefici	ally	owned dire	ectly or ind	irectly.								
									ho respond						174 (9-02)	
									y valid OMB				orm diopia	,,,		
			Table I						of, or Benefic		d					
1. Title of		3. Transaction	3A. Deemed	4.		5. Numbe	r of	6. Date Exe	ercisable and	7. Title and			9. Number o		11. Nature	
Security		(Month/Day/Year)		Code		Securities	Acquired	Expiration (Month/Da		of Underly Securities	ŭ	Security	Derivative Securities	1	curities Form of Ben	
(Instr. 3)	Price of Derivative		(Month/Day/Year)	(Instr. 8		(A) or Dis (D)	sposed of			(Instr. 3 an	id 4)	(Instr. 5)	Beneficially Owned	Derivative Security:	(Instr. 4)	
	Security				1	(Instr. 3, 4	1, and 5)		1		1		Following Reported	Direct (D) or Indirect		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction((Instr. 4)			
Stock				Couc	V	(A)	(D)				01 Shares					
Option (Right to Buy)	\$ 3.49	08/29/2018		D			180,000 (1)	(2)	06/19/2026	Common Stock	180,000	\$ 0	0	D		
Stock																
Option (Right to Buy)	\$ 1.5	08/29/2018		A		180,000		<u>(2)</u>	06/19/2026	Common Stock	180,000	\$ 0	180,000	D		
Stock																
Option (Right to Buy)	\$ 3.8	08/29/2018		D			80,000	<u>(4)</u>	11/09/2026	Common Stock	80,000	\$ 0	0	D		
Stock																
Option (Right to Buy)	\$ 1.5	08/29/2018		A		80,000		<u>(4)</u>	11/09/2026	Common Stock	80,000	\$ 0	80,000	D		
Stock Option	\$ 1.96	08/29/2018		D			125,000	<u>(6)</u>	04/26/2027	Common	125,000	\$ 0	0	D		
(Right to Buy)							<u>(5)</u>			Stock						
Stock Option (Right to	\$ 1.5	08/29/2018		A		125,000		<u>(6)</u>	04/26/2027	Common Stock	125,000	\$ 0	125,000	D		

Donaston Omero Name / Address			Relationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Smith Mark Alan				
C/O VISTAGEN THERAPEUTICS, INC.			CHIEF MEDICAL OFFICER	
343 ALLERTON AVENUE			CHIEF MEDICAL OFFICER	
SOUTH SAN FRANCISCO, CA 94080				

Signatures

		1
/s/ Je	rrold D. Dotson, Attorney-in-Fact	08/31/2018
	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 reporting person agreed to cancellation of an option granted to him on 6/19/2016 in exchange for a new option having a lower exercise price.
- (2) The option vests monthly over a period of four years commencing 6/19/2016.
- (3) The reporting person agreed to cancellation of an option granted to him on 11/9/2016 in exchange for a new option having a lower exercise price.
- (4) The option vests monthly over a period of three years commencing 11/9/2016.
- (5) The reporting person agreed to cancellation of an option granted to him on 4/26/2017 in exchange for a new option having a lower exercise price.
- (6) The option vests monthly over a period of three years commencing 4/26/2017.

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.