Edgar Filing: VistaGen Therapeutics, Inc. - Form 4

VistaGen Ther	apeutics, Inc.										
Form 4											
February 16, 2	016										
FORM	4						OMB A	PPROVAL			
	UNITED 5	TATES			ND EXCHANGE D.C. 20549	COMMISSION	OMB Number:	3235-0287			
Check this if no longer subject to	•	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
Section 16.				SECUR	Estimated average burden hours per						
	Form 4 or Form 5 obligations may continue.response0.8See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19400.8										
(Print or Type Rea	sponses)										
1. Name and Address of Reporting Person <u>*</u> Singh Shawn			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
	VistaGe	n Therape	eutics, Inc. [VSTA]	(Check all applicable)							
(Last)	(Last) (First) (Middle)			Earliest Tra	ansaction						
C/O VISTAG INC., 343 AL	(Month/Da 02/12/20	-		Director 10% Owner Officer (give title Other (specify below) below) below) CHIEF EXECUTIVE OFFICER							
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
SOUTH SAN FRANCISCO						Form filed by M Person					
(City)	(State) (Z	Zip)	Table	e I - Non-De	erivative Securities Ac	quired, Disposed of	, or Beneficial	lly Owned			
	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I)				

							Following	(Instr. 4)	(Instr. 4)
					(•)		Reported		
					(A)		Transaction(s)		
					or		(Instr. 3 and 4)		
		Code	V	Amount	(D)	Price	(Instr. 5 und 1)		
Common	02/12/2016	٨		5,625	۸	\$0	26,234 <u>(2)</u>	т	By Trust
Stock	02/12/2010	А		(1)	A	(1)	20,234 <u></u>	1	(3)

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

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 control number.

 Table II - Derivative 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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Warrant	\$ 10	02/12/2016		D	2,500 (2)	02/06/2012	12/06/2017	Common Stock	2,500
Warrant	\$ 20	02/12/2016		D	5,000 (2)	02/06/2012	12/06/2017	Common Stock	5,000

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Singh Shawn C/O VISTAGEN THERAPEUTICS, INC. 343 ALLERTON AVENUE SOUTH SAN FRANCISCO, CA 94080			CHIEF EXECUTIVE OFFICER					
Signatures								
/s/ Jerrold D. Dotson, Attorney-in-Fact	02/16/20	016						

**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) Warrants for aggregate 7,500 shares surrendered and canceled in exchange for unregistered shares of Issuer common stock at a ratio of 0.75 x warrant shares to be exchanged.
- (2) Number of shares and price have been adjusted to reflect the 20:1 reverse split of the Company's Common Stock on August 14, 2014.
- (3) Held by The 1997 Singh Family Trust U/R/D 5/29/97.

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.

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