### Edgar Filing: DOTSON JERROLD DUANE - Form 3/A

#### DOTSON JERROLD DUANE

Form 3/A March 14, 2012

## FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**OMB APPROVAL** 

**OMB** Number:

3235-0104

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January 31, 2005

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**SECURITIES** 

Filed 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 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

 **DOTSON JERROLD** 

**DUANE** 

(Last)

(First)

(Middle)

(Month/Day/Year)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol VistaGen Therapeutics, Inc. [VSTA]

C/O VISTAGEN

THERAPEUTICS, INC., Â 384 OYSTER POINT BLVD. SUITE

8

(Street)

Statement

09/19/2011

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

09/20/2011

(Check all applicable)

**ACTING CFO** 

Director Officer

\_ 10% Owner \_ Other

(give title below) (specify below)

6. Individual or Joint/Group

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

**SOUTH SAN** FRANCISCO, Â CAÂ 94080

(City) (State)

(Instr. 4)

1. Title of Security

(Zip)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities

Beneficially Owned (Instr. 4)

3.

Ownership

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Form: Direct (D) or Indirect

(I) (Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security 2. Date Exercisable and (Instr. 4)

**Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise

5. Ownership Form of

6. Nature of Indirect Beneficial

Ownership Price of Derivative (Instr. 5)

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|                             | Date<br>Exercisable | Expiration<br>Date | Title           | Amount or<br>Number of<br>Shares | Derivative<br>Security | Security: Direct (D) or Indirect (I) (Instr. 5) |           |
|-----------------------------|---------------------|--------------------|-----------------|----------------------------------|------------------------|---|-----------|
| Stock Option (Right to Buy) | 03/24/2009          | 03/24/2019         | Common<br>Stock | 2,500                            | \$ 1.13                | I   | By Spouse |
| Stock Option (Right to Buy) | (1)                 | 04/25/2021         | Common<br>Stock | 10,000                           | \$ 1.75                | I   | By Spouse |
| Stock Option (Right to Buy) | 01/17/2008          | 01/17/2018         | Common<br>Stock | 1,000                            | \$ 2.1                 | I   | By Spouse |

# **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |            |       |  |
|--|---------------|-----------|------------|-------|--|
|  | Director      | 10% Owner | Officer    | Other |  |
| DOTSON JERROLD DUANE<br>C/O VISTAGEN THERAPEUTICS, INC.<br>384 OYSTER POINT BLVD. SUITE 8<br>SOUTH SAN FRANCISCO, CA 94080 | Â             | Â         | ACTING CFO | Â     |  |

## **Signatures**

| /s/ Jerrold D.<br>Dotson        | 03/14/2012 |  |  |
|---------------------------------|------------|--|--|
| **Signature of Reporting Person | Date       |  |  |

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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 option vests periodically over a period of four years.

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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