FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number: 3235-028 Estimated average burden								
	hours ner 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)

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. Name and Address of Reporting Person* Kupfer David (Last) (First) (Middle) C/O MINERVA NEUROSCIENCES, INC., 1500 DISTRICT AVENUE				- 3. [Issuer Name and Ticker or Trading Symbol Minerva Neurosciences, Inc. [NERV] Jate of Earliest Transaction (Month/Day/Year) 09/27/2023							eck all applic	able)	Person(s) to Iss 10% Ov Other (s below)	vner	
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street)	IGTON M	IA	01803		Rı	ule 1	0h5-1	1(c)	Transac	tion Ind	ication		Form fi Person		than One Repo	rting
(City)	(5	state)	(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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							l to			
		Tab	le I - Non-	-Deriv	vativ	e Sec	urities	s Ac	quired, Di	sposed o	f, or Be	neficiall	y Owned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Executio		Date,	Code (Inst	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)		ed (A) or tr. 3, 4 and	5. Amour Securitie Beneficia Owned F	s F ally (I ollowing (I	orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V	Amount	(A) or (D) Price		Transact (Instr. 3 a	ion(s)		,	
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	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate,	4. Transaction Code (Instr. 8)		of E		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	٧	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy) ⁽¹⁾	\$7.3	09/27/2023			A		12,500		(2)	09/26/2033	Common Stock	12,500	\$0.00	12,500	D	

Explanation of Responses:

- 1. This option is granted to non-employee directors in accordance with the Company's compensation program for non-employee directors, which provides that each non-employee director is eligible to receive an annual option grant to purchase 12,500 shares of common stock per year.
- 2. The shares subject to this option vest in four equal quarterly installments at a rate of 1/4 of the total number of shares every three months, with the first 1/4 vesting on the date that is three months following September 27, 2023 and an additional 1/4 every three months thereafter, subject in each case to the continued service of the Reporting Person as a non-employee director as of such vesting date.

Remarks:

/s/ Marc Recht, Attorney-in-

09/29/2023

Fact

** Signature of Reporting Person Date

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.