SEC For	m 4 FORM	Л			ATES S	FCURITIE	S AN		ХСНА	NGF	= c.c	MMIS	SSION					
	UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549												OMB APPROVAL					
Section 16. Form 4 or Form 5 obligations may continue. See				ed pursuar	AT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] Laghrissi-Thode Fouzia					2. Issuer Name and Ticker or Trading Symbol <u>Minerva Neurosciences</u> , <u>Inc.</u> [NERV]							ck all applica	able)	, 10% O		Owner		
	O MINERVA NEUROSCIENCES, INC.,					3. Date of Earliest Transaction (Month/Day/Year) 06/10/2022							Officer (below)	give title		Other (s below)	specify	
1601 TRAPELO ROAD, SUITE 286					4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	(Street) WALTHAM MA 02451												Form fil	-	by One Reporting Person by More than One Reporting			
(City)	(S	tate)	(Zip)															
		Та	ble I - Noi	n-Deriv	vative S	ecurities Acc	quired	, Dis	posed o	of, or	Bene	ficially	/ Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				saction /Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(1150. 4)		
						curities Acqu lls, warrants,							Owned		,			
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction 3A. Deemed Conversion Date Execution I or Exercise (Month/Day/Year) if any Price of (Month/Day/Year) if ony Derivative Security Image: Control of the security		ate, Transaction Code (Instr.		Derivative	Expiratio	Date Exercisable and xpiration Date lonth/Day/Year)			curities rlying	ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transact	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)		

2. On June 17, 2022, the Issuer completed a 1-for-8 reverse stock split of the Issuer's common stock ("Reverse Stock Split"). This amount has been adjusted to give effect to the Reverse Stock Split. 3. 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 June 10, 2022 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.

1. This option is granted to non-employee directors in accordance with the Issuer's compensation program for non-employee directors, which provides that each non-employee director is eligible to receive an annual option grant to purchase 2,500 shares of common stock per year.

Date

Exercisable

(3)

(D)

Expiration Date

06/09/2032

Title

Commor

Stock

Remarks:

Stock Option

(right to buy)⁽¹⁾

\$3.32⁽²⁾

Explanation of Responses:

/s/ Marc Recht, Attorney-in-06/28/2022 Fact

Amount

or Number

Shares

2,500(2)

\$0.00

of

(Instr. 4)

2,500⁽²⁾

D

** 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).

06/10/2022

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code v

Α

(A)

2,500⁽²⁾

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.