SEC Foi	rm 4 FORM	4	UNITEI	D ST/	ATES	S	ECUR	ITIE	ES AND	E	ХСНА	NGE	С	OMM	ISSION					
							Washington, D.C. 20549										OMB APPROVAL			
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 OWNE Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											SHIP	Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person* <u>Watson W. Mark</u>					Va	2. Issuer Name and Ticker or Trading Symbol <u>Vaxart, Inc.</u> [VXRT]									eck all applie X Directo	cable) or	:		0% Owner	
(Last) (First) (Middle)													Officer below)				specify			
C/O VAXART, INC. 170 HARBOR WAY, SUITE 300 (Street)				4. If	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 Form filed by More than One Reporting						
SOUTH SAN				94080			Rule 10b5-1(c) Transaction Indication													
(City) (State) (Zip)					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.															
		Tab	le I - Noi	n-Deri	vative	Se	curities	s Ac	quired, D	isp	oosed o	of, or E	Ber	neficial	ly Owned	k				
1. Title of Security (Instr. 3) Date (Month/D					ar)	if any	ecution Date,		Transaction Di Code (Instr. 5)		I. Securities Acquired (A) Disposed Of (D) (Instr. 3, i)			4 and Securities Beneficially Owned Follo		Form (D) o	n: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	mount (A) o (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 06/26/					6/2023	2023			A		7,375	,375 ⁽¹⁾ A		\$0	42,125			D		
		T	able II -	Deriva (e.g., j	ative S puts, c	Sec call	urities s, warra	Acq ants	uired, Dis s, options	spo , co	osed of, onverti	, or Be ble se	ene cu	ficially rities)	Owned					
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/Yea		4. Transactic Code (Inst 8)				6. Date Exer Expiration D (Month/Day/		Amount of Securities Underlying Derivative 5 (Instr. 3 and		Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title		Amount or Number of Shares						

Stock Option (right to buy) \$<mark>0.74</mark>

Explanation of Responses:

1. Grant of shares upon vesting of restricted stock units. The shares underlying the award shall vest on the earlier of the date immediately prior of the 2024 annual meeting of stockholders of the Issuer and June 26, 2024, the first anniversary date of the grant.

(2)

2. The shares subject to this option shall vest on the earlier of the date immediately prior of the 2024 annual meeting of stockholders of the Issuer and June 26, 2024, the first anniversary of the date of the grant.

> /s/ Edward Berg, Attorney-in-08/01/2023 Fact for W. Mark Watson

44,224

\$<mark>0</mark>

44,224

D

06/26/2033

Common Stock

** 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).

06/26/2023

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

44,224

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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.