## FORM 4

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

OMB APPROVAL
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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 OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
Name and Address of Reporting Person * Migliarese Antonio				2. Issuer Name and Ticker or Trading Symbol CytoDyn Inc. [CYDY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 1111 MAIN STREET, SUITE 660				3. Date of Earliest Transaction (Month/Day/Year) 06/15/2022							X Officer (give title below) Other (specify below)  CFO & Interim President						
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person						
VANCOUVER, WA 98660 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						Acqui	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		(Instr. 8)		ction	4. Securities Acquirec (A) or Disposed of (D (Instr. 3, 4 and 5)							Ownership Form:	hip of B	7. Nature of Indirect Beneficial Ownership	
				(Month/Day/Year)  Code V		Amou		(A) or (D)	Price				nstr. 4)				
Common	Stock		06/15/2022			A		10,80 (1)	7	A	\$ 0	81,225			D		
				Derivative Securiti		quire	the fo	orm dis	splay	ys a c r Bene	urrer eficial	ntly valid	uired to res				
1. Title of Derivative Conversion Date Security Or Exercise (Month/Day/Year) 3A. Deemed Execution Date any		4. Transaction Code (Instr. 8)	, if Transaction Number Of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)  Amount or Title Number of		Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Own Form Deri Secu Director In	vative rity: ct (D) direct	Beneficia Ownershi (Instr. 4)				
				Code V	(A)	(D)						Shares					
Repor	ting O	wners															

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Migliarese Antonio 1111 MAIN STREET, SUITE 660 VANCOUVER, WA 98660			CFO & Interim President				

## **Signatures**

/s/ Antonio Miglia	arese	06/21/2022
**Signature of Reporting Po	erson	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) Represents awards of fully vested shares under the issuer's 2012 Equity Incentive Plan approved by its Compensation Committee of the Board of Directors with a value on the respective date of grant equal to reduction in reporting person's cash salary.

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.