(Print or Type Responses)

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

OMB APPRO	OVAL					
OMB Number:	3235-0287					
Estimated average burden						
hours per response	0.5					

hours per response.

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

Name and Address of Reporting Person *  Kelly Scott A.					2. Issuer Name <b>and</b> Ticker or Trading Symbol CytoDyn Inc. [CYDY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_Director10% Owner					
1111 MA	- 7	ET, SUITE 660	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/19/2019						-	Officer (give t	tle below)	Other	(specify below)			
				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
VANCOUVER, WA 98660 (City) (State) (Zip)																		
(CI	iy)	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	Exe ear) any	cutio	on Date, if		nsaction 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Owned Following Transaction(s)		curities Beneficially g Reported		Ownership Form:	7. Nature of Indirect Beneficial		
			(Mo	onth/	Day/Year)	Cod	le	V A	Amount	(A) or (D)		(Instr. 3 and 4)		0	r Indirect	Ownership Instr. 4)		
Reminder:	Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  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 Acquired, Disposed of, or Beneficially Owned																	
	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	tion	5. Number Derivative Securities Acquired (A	ivative Expiration Date (Month/Day/Year) uired (A) or posed of (D) tr. 3, 4, and		and	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)  8. Price of Derivative Securities Securities Owned Following Reported Transaction		Ownersh Form of Derivativ Security Direct (I or Indire	Ownership (Instr. 4)			
				Code	V	(A)	(D)	Date Exerc	isable	Expirat Date	ion	Title	Number of Shares		(Instr. 4)	(Instr. 4)		
Stock Option (right to buy)	\$ 0.63	12/19/2019		A		1,250,000	)	Ĺ	<u>1)</u>	12/19/	/2029	Commo	1,250,000	\$ 0	1,250,000	D		

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Kelly Scott A. 1111 MAIN STREET, SUITE 660 VANCOUVER, WA 98660	X					

## **Signatures**

/s/ Michael D. Mulholland, as attorney-in-fact	12/23/2019
**Signature of Reporting Person	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) 750,000 options vest immediately upon grant and 500,000 options vest upon the achievement of certain additional strategic milestones specified in the award

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.