FORM D

Notice of Exempt Offering of Securities

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours per response: 4.0

1. Issuer's Identity	
CIK (Filer ID Number)	Previous Name(s) 🔲 None
0000109657	OXIS INTERNATIONAL
Name of Issuer	
GT Biopharma, Inc.	DDI PHARMACEUTICALS
Jurisdiction of	INC
Incorporation/Organization	DIAGNOSTIC DATA
FLORIDA	INC /DE/

Year of Incorporation/Organization

- Over Five Years Ago
- Within Last Five Years
- (Specify Year)
- Yet to Be Formed

Entity Type

•	Corporation
0	Limited Partnership
0	Limited Liability Company
0	General Partnership
0	Business Trust
0	Other

2. Principal Place of Business and Contact Information

Name of Issuer			
GT Biopharma, Inc.			
Street Address 1	St	reet Address 2	
1825 K Street, Suite 510			
City	State/Province/Country	ZIP/Postal Code	Phone No. of Issuer
Washington	DISTRICT OF COLUMBIA	20006	800-304-9888

3. Related Persons

Last Name	First Name		Middle Name
Weldon	Steven		
Street Address 1		Street Address 2	-
1825 K Street, Suite 510			
City	State/Province/C	ountry	ZIP/Postal Code
Washington	DISTRICT OF	COLUMBIA	20006
Relationship: Execu	tive Officer	Director	Promoter
Clarification of Response (if Necessa	rv)		

First Name	Middle Name
Anthony	J.
Street Address 2	
State/Province/Country	ZIP/Postal Code
	Anthony Street Address 2

Washington	DISTRICT C	OF COLUMBIA	20006
Relationship:	Executive Officer	Director	Promoter
Clarification of Response (if N	ecessary)		
Last Name	First Name		Middle Name
Clarence-Smith	Kathleen		
	Katnieen		<u>_</u>
Street Address 1		Street Address 2]
1825 K Street, Suite 510			
City	State/Province	/Country	ZIP/Postal Code
Washington	DISTRICT C	OF COLUMBIA	20006
Relationship:	Executive Officer	Director	Promoter
Clarification of Response (if N	ecessary)		
A X	U Y		
Last Name	First Name		Middle Name
Last Name Davis	First Name		Middle Name
	1	Street Address 2	
Davis	1	Street Address 2	
Davis Street Address 1	1		
Davis Street Address 1 1825 K Street, Suite 510	Geoffrey State/Province] B .
Davis Street Address 1 1825 K Street, Suite 510 City	Geoffrey State/Province	/Country	B. ZIP/Postal Code
Davis Street Address 1 1825 K Street, Suite 510 City	Geoffrey State/Province	/Country	B. ZIP/Postal Code

4. Industry Group

C Agriculture

Banking & Financial Services

- C Commercial Banking
- C Insurance
- C Investing
- C Investment Banking
- C Pooled Investment Fund
- Other Banking & Financial C Services

C Business Services

Energy

- C Coal Mining
- C Electric Utilities
- C Energy Conservation
- C Environmental Services
- C Oil & Gas
- C Other Energy

Health Care

- Biotechnology
- C Health Insurance
- C Hospitals & Physicians
- C Pharmaceuticals
- C Other Health Care

C Manufacturing

Real Estate

- C Commercial
- C Construction
- C REITS & Finance
- C Residential
- C Other Real Estate

C Retailing

C Restaurants

Technology

- C Computers
- Telecommunications
- C Other Technology

Travel

- C Airlines & Airports
- C Lodging & Conventions
- C Tourism & Travel Services
- C Other Travel

C Other

5. Issuer Size

Reve	nue Range	Aggreg	gate Net Asset Value Range	
\mathbf{O}	No Revenues	C	No Aggregate Net Asset Value	
$\overline{\mathbf{O}}$	\$1 - \$1,000,000	С	\$1 - \$5,000,000	
С	\$1,000,001 - \$5,000,000	0	\$5,000,001 - \$25,000,000	
0	\$5,000,001 - \$25,000,000	0	\$25,000,001 - \$50,000,000	
0	\$25,000,001 - \$100,000,000	0	\$50,000,001 - \$100,000,000	
\mathbf{C}	Over \$100,000,000	0	Over \$100,000,000	
С	Decline to Disclose	C	Decline to Disclose	
0	Not Applicable	O	Not Applicable	

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

7. Type of Filing ✓ New Notice Date of First Sale 2018-01-23 First Sale Yet to Occur

Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year?

C Yes © No

9.	Type(s) of Securities	s C	Offered (select all that apply)
Π	Pooled Investment Fund Interests	Γ	Equity
\Box	Tenant-in-Common Securities	•	Debt
Γ	Mineral Property Securities	•	Option, Warrant or Other Right to Acquire Another Security
	Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	Π	Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?

Γ

Clarification of Response (if Necessary)

11. Minimum Investment

1

\$ 0

USD

12. Sales Compensation Recipient	Recipient CRD Number
(Associated) Broker or Dealer None	(Associated) Broker or Dealer CRD
Street Address 1	Number
City	State/Province/Country ZIP/Postal Code
State(s) of Solicitation	All States

i otal Ol	fering Amount	\$	7055000		USD	Indefinite			
Fotal Ar	nount Sold	\$	7055000		USD				
Fotal Re Sold	emaining to be	\$	0		USD	□ Indefinite			
Clarifica	tion of Response	e (if	Necessary)]			
14. li	nvestors								
Γ	do not qualify a	as ac	credited invest	ors,	·	e sold to persons v y have invested in			
	do not qualify a Number of such offering Regardless of w	as ac h no vhetl o not	credited invest n-accredited in her securities in qualify as accr	ors, vestors who n the offerin redited inve	o already	y have invested in been or may be so iter the total num	the	4	
	do not qualify a Number of such offering Regardless of w persons who do	as ac h no vhetl o not	credited invest n-accredited in her securities in qualify as accr	ors, vestors who n the offerin redited inve	o already	y have invested in been or may be so iter the total num	the	4	

expenditure is not known, provide an estimate and encek the box next to the amount						
Sales Commissions	\$ 0	USD	Estimate			
Finders' Fees	\$ 0	USD	Estimate			
Clarification of Response (if Necessary)						

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 0

🔽 Estimate

USD

None, other than compensation to executive officers in their roles as employees.

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
GT Biopharma, Inc.	/s/ Steven Weldon	Steven Weldon	Chief Financial Officer	2018-02-06