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

FORM 8-K

CURRENT REPORT Pursuant to Section 13 OR 15(d) of The Securities Exchange Act of 1934

Date of Report: (Date of earliest event reported) September 13, 2021

		GT Bioph	arma. Inc.							
		(Exact name of registrant		ter)						
			<u>Delaware</u>							
		(State or other Jurisdic	etion of Incorporation)							
				94-1620407 (IRS Employer Identification No.)						
	(Commission File	,		(IKS Employer Identification IVO.)						
		9350 Wilshire I <u>Beverly Hill</u> (Address of Principal Exec	s, CA 90212	ode)						
		(800) 304-9888(Registrant's telepl	none number, including	g area code)						
Chec	ck the appropriate box below if the Form 8-K f	iling is intended to simultaneously sat	isfy the filing obligation	on of registrant under any of the following provisions:						
	Written communications pursuant to Rule 42 Soliciting material pursuant to Rule 14a-12(b Pre-commencement communications pursuant to Rule 42 Soliciting Material Pre-commencement communications pursuant Pre-commencement Communications Pre-comme	under the Exchange Act (17 CFR 24 at to Rule 14d-2(b) under the Exchange	40.14a-12(b)) ge Act (17 CFR 240.14							
Secu	rities registered pursuant to Section 12(b) of the	ne Act:								
	Title of each Class	_	Symbol(s)	Name of each Exchange on which registered						
Com	mon stock, \$0.001 par value	G.	ГВР	The NASDAQ Stock Market LLC						
	rate by check mark whether the registrant is a rities Exchange Act of 1934 (17 CFR 240.12b		ned in Rule 405 of the	Securities Act of 1933 (17 CFR 230.405) or Rule 12b-2 of the						
				Emerging growth company \Box						
	emerging growth company, indicate by check unting standards provided pursuant to Section		t to use the extended t	ransition period for complying with any new or revised financial						
Item	8.01. Other Events.									
telec	On September 13, 2021, the Registrant's onference as of September 13, 2021 is filed as			ness via teleconference. The Registrant's presentation for such						
Item	9.01 Financial Statements and Exhibits.									
(d)	Exhibits.									
	99.1 GT Biopharma, Inc. Prese	ntation as of September 10, 2021.								
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SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the Registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Date: September 13, 2021 By: /s/ Michael Handelman

Michael Handelman Chief Financial Officer



Target Directed NK Cell Immunotherapy NASDAQ: GTBP

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10 September 2021

FORWARD LOOKING STATEMENT

This presentation includes statements that are, or may be deemed, "forward-looking statements." In some cases, you can identify forward-looking statements by terminology including "anticipates," "believes," "can," "continue," "could," "estimates," "expects," "intends," "may," "plans," "potential," "predicts," "should," "will," "would" or the negative thereof, other variations thereon or other comparable terminology. We operate in a very competitive and rapidly-changing environment and new risks emerge from time to time. As a result, it is not possible for our management to predict all risks, nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statements we may make. In light of these risks, uncertainties and assumptions, the forward-looking events and circumstances discussed in this presentation may not occur and actual results could differ materially and adversely from those anticipated or implied in the forward-looking statements. You are cautioned not to place undue reliance upon such forward looking statements as predictions of future events. Although we believe that the expectations reflected in the forward-looking statements are reasonable, we cannot guarantee that the future results, levels of activity, performance or events and circumstances reflected in the forward-looking statements will be achieved or occur. We direct you to our Annual Report on Form 10-K for the year ended December 31, 2020, our subsequent current reports on Form 8-K, our Quarterly Report on Form 10-Q for the quarter ended, and our other filings with the Securities and Exchange Commission. Any forward-looking statement included in this presentation speaks only as of the date hereof. Except as required by law, we do not undertake any obligation to update or revise, or to publicly announce any update or revision to, any of the forward-looking statements, whether as a result of

This presentation is made pursuant to Rule 163B under the Securities Act of 1933, as amended, and is intended solely for investors that are either qualified institutional buyers or institutions that are accredited investors (as such terms are defined under Securities and Exchange Commission rules) solely for the purpose of determining whether such investors might have an interest in a securities offering contemplated by us. Any such offering of securities will only be made by means of a registration statement (including a prospectus) filed with the Securities and Exchange Commission, after such registration statement becomes effective. No such registration statement has become effective as of the date of this presentation. This presentation shall not constitute an offer to sell or the solicitation of an offer to buy these securities, nor shall there be any sale of these securities in any state or jurisdiction in which such offer, solicitation or sale would be unlawful prior to registration or qualification under the securities laws of any such state or jurisdiction. In the event we conduct an offering, before you invest, you should read the prospectus in the registration statement and other documents we file with the Securities and Exchange Commission for more complete information about us and the offering. You may get these documents for free by visiting EDGAR on the Securities and Exchange Commission website at http://www.sec.gov.



GT BIOPHARMA RECENT MAJOR MILESTONES

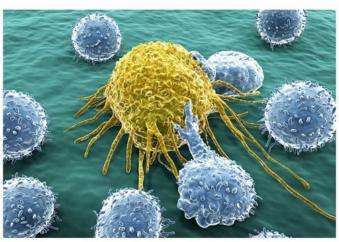


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COMPANY FOCUS - HARNESSING NATURAL KILLER CELLS TO FIGHT CANCER

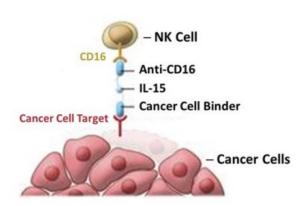


Source: Levy R. Paths of Progress 2019, Natural Killer Cells: How the immune system's first wave of defense may play a newfound role in cancer care; accessed: 6 September 2021 https://www.dana-farber.org/newsroom/publications/paths-of-progress-2019/natural-killer-cells/

- Restore patient's exhausted/inhibited endogenous NK cell population to again recognize and kill cancer cells.
- Natural Killer (NK) cells are cytotoxic lymphocytes of the innate immune system.
- NK cells are analogous to cytotoxic T-cells of the adaptive immune system.
- NK cells are early responders that recognizes and kills stressed cells in the absence of antibodies.
- Minimize toxicities such as cytokine release syndrome (CRS) resulting from hyperactivation of T-cells.
- TriKE® is an immune oncology protein therapeutic which activates NK cells, and directs them to specific cancer cell targets. TriKE® is not a cell therapy.



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Key Therapeutic Features:

- · Target-directed ADCC killing.
- Integrated cytokine support within the tumor micro-environment (TME).
- Simultaneous NK cell ADCC activation, proliferation and persistence.
- First-in-Class modular immune oncology protein therapeutic platform technology.



Persistence means the ability of an NK cell population to exist at activated levels in the body for periods of several weeks, with each activated NK cell able to mediate the serial killing of multiple cancer cells.

TRIKE® PRODUCT CANDIDATE PIPELINE

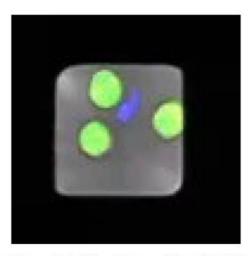
TriKE®	Approach	Indication	Stage				Status	
Product Candidates			Pre-Clinical	GMP Manufacturing	Phase 1	Phase 2	Phase 3	
GTB-3550	Monotherapy	Leukemia – AML, MDS						Phase 1
GTB-3650 2 nd Generation	Monotherapy	Leukemia – AML, MDS, MRD						Pre-IND
Camelid	Combination with Chemotherapy	Leukemia – AML, MDS, MRD						Pre-IND
GTB-4550 Camelid	Monotherapy & Combination	PD-L1 / Solid Tumor Cancers						Pre-IND
GTB-5550 Camelid	Monotherapy & Combination	B7H3 / Solid Tumor Cancers	4					Pre-IND
GTB-6550 Camelid	Monotherapy & Combination	HER2 / Breast & Gastric Cancers						Pre-IND
Other Undisclosed Candidates	Monotherapy & Combination	Solid tumors & Infectious Disease						Pre-IND

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TRIKE® DIRECTED NK CELL SERIAL KILLING OF AML CANCER CELLS



Enhanced Serial Killing of Cancer cells (green) by TriKE directed NK cell (blue).

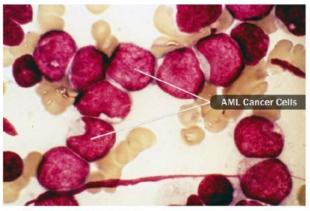
Source: Sarhan D et al. Blood Adv 2018 Jun 26; 2(12): 1459-1469

- Integrated CD16 and IL-15 in TriKE drives:
 - NK cell ADCC activation for enhanced serial killing of cancer cells
 - > NK cell proliferation
 - > NK cell persistence
- TriKE minimizes toxicities such as cytokine release syndrome (CRS) resulting from hyperactivation of T-cells.
- TriKE therapeutics can be used to treat solid tumors and hematological cancers.
- TriKE is an immune oncology protein therapeutic

 not a cell therapy.



GTB-3550 TRIKE® PRODUCT CANDIDATE

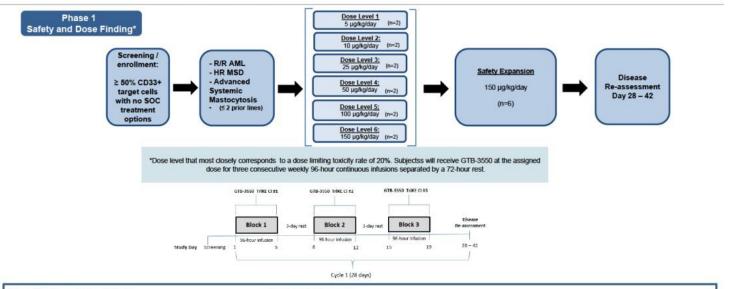


Source: Pr. J Bernard/CNRI/Science Source

- First-in-Class immune oncology therapy.
- Target-directed NK cell ADCC killing of CD33+ hematological cancers.
- Incorporates IL-15 within therapeutic for enhanced NK cell proliferation and persistence.
- Currently being evaluated in a First-in-Human Phase 1 clinical trial.

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TRIKE® GTB-3550 PHASE 1 STUDY DESIGN



Phase 1 (safety and dose finding)

- Six dose levels*
 Escalation based on continual reassessment method; Cohorts of 2 subjects
 Day 28 (end of DLT assessment period)

Phase 1 Safety Expansion

- Primary Endpoints: Determine safety and maximum tolerated dose, RP2D and schedule
 Secondary Endpoints: Estimate OS at 6 months
 Exploratory Endpoints: Number, activation status, and function of NK cells, T-cells, T-regs, and MDSC pre and post therapy (CD16 and CD62L)

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GTB-3550 TRIKE® FIRST-IN-HUMAN CLINICAL TRIAL INTERIM RESULTS

Patient	Dose Level	Disease and Prior Treatment History	Disease Characteristics Before GTB-3550 Therapy	Disease Characteristics After GTB-3550 Therapy
1	5 mcg/kg/day	Therapy-related AML. Failed 3 lines of induction therapy.	Cellularity: 10%	Cellularity: 10-20%
500000	STEEL ASSESSMENT OF THE STEEL	TO MENORS TO GRANDED AND STANDARD SERVICES AND STANDARD REPORTS	Blasts: 5-10%	Blasts: 10%
2	5 mcg/kg/day	AMLw/FLT-3 ITD mutation. Induction therapy x2, with CRi. Relapse, then 2x therapy with refractory	Cellularity: 70-80%	Cellularity: 90-95%
		disease.	Blasts: 5-7%	Blasts: 94%
3	10 mcg/kg/day	AML. Azacitidine x1 year with disease control before progression. Brief remission with Venetoclax +	Cellularity: 100%	Cellularity: 100%
10000	NEX OF SEC. CASE AND S	cytarabine. No response to IDH2 inhibitor.	Blasts: 85%	Blasts: 92%
4	10 mcg/kg/day	Therapy-related MDS. Residual disease after HMA and HMA+ Venetoclax.	Cellularity: <5%	Cellularity: <5%
			Blasts: 10-20%	Blasts: 10-20%
5	25 mcg/kg/day	Secondary AML 18 month CR with Venetoclax + Azacitidine prior to relapse.	Cellularity: 10-15%	Cellularity: 20%
	VIDEOUS AND SECOND	Unique FLT-3 mutation not responsive to Gilterinib.	Blasts: 18%	Blasts: 12%
6	25 mcg/kg/day	AML Failed reinduction with Ventoclax and HMA	Cellularity: 10-25%	Cellularity: 10-20%
	127 102 00	11/2/11/11/11/11/11/11/11	Blasts: 29%	Blasts: 35%
7	50 mcg/kg/day	MDS/MPN with Red Cell transfusion dependence post HMA and Luspatercept	Cellularity: 70-80%	Cellularity: 60%
			Blasts: 12%	Blasts: 4.6%
8	50 mcg/kg/day	High Grade MDS. 7 year remission post UCB HCT.	Cellularity: 20%	Cellularity: 30%
		Post-HCT relapse treated with Azacitidine Remission duration: 1 year prior to disease progression	Blasts: 12%	Blasts: 19%
		Concurrent asymptomatic smoldering myeloma	Concurrent smoldering myeloma 20% plasma cells	Concurrent smoldering myeloma with 20-25% plasma cells
9	100 mcg/kg/day	High Grade MDS:	Cellularity: 10%	Cellularity: 10-20%
5-A/A		Azacitidine, Decitabine, 7+3, MUD RIC HCT	Blasts: 22%	Blasts: 8%
		Relapse Day +100, Progression to AML, Lack of Response to Decitabine + Venetoclax	7	

Clinical Efficacy Demonstrated:

• Subject 5: 33.3% Reduction in Blast Levels

• Subject 7: 61.7% Reduction in Blast Levels

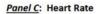
• Subject 9: 63.6% Reduction in Blast Levels

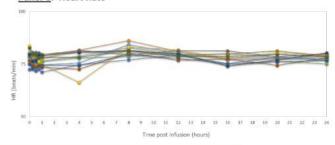


GTB-3550 TRIKE® IS WELL TOLERATED BY SUBJECTS ENROLLED

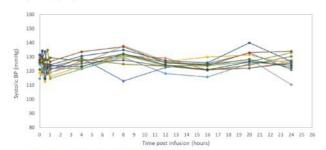
Panel A: Dose Equivalent of GTB-3550 and Systemic Maximum
Theraneutic Dose of II-15

PER MOLE BASIS		
Dose of GTB-3550 (μg/kg)	Fold Higher than MTD rhIL-15	
5	0.54	
10	1.08	
25	2.69	
50	5.38	
100	10.75	
150	16.13	

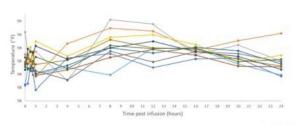




Panel B: Systolic Blood Pressure



Panel D: Body Temperature



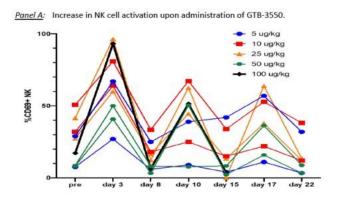
Data cut: OnCore DB 26 July 21

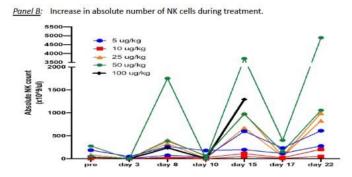
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GTB-3550 TRIKE® FIRST-IN-HUMAN CLINICAL TRIAL INTERIM RESULTS

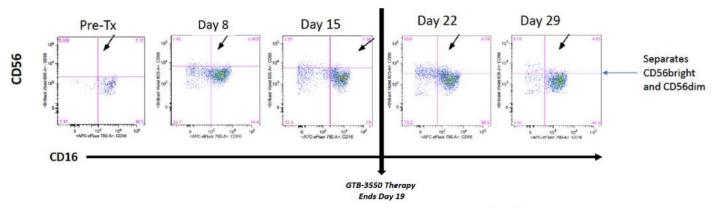
TriKE® activates endogenous NK cells in the periphery and they egress into tissues







No Loss of CD16 During GTB-3550 Therapy



Data from Subject #7 treated with 50 μg/kg/day

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GTB-3550 TRIKE® FIRST-IN-HUMAN CLINICAL TRIAL INTERIM RESULTS

- GTB-3550 TriKE induces reproducible NK cell proliferation in all subjects at all dose levels evaluated with no clinically significant toxicity. No CRS resulting from hyperactivation of subject's T-cell population at doses $5-100 \,\mu\text{g/kg/day}$.
- Clinical responses to date demonstrate strong NK cell activation, persistence, proliferation and targeted cancer cell killing.
- GTB-3550 significantly reduced bone marrow blast levels 33.3%, 61.7% and 63.6%, in Subject 5 (25 μ g/kg/day), Subject 7 (50 μ g/kg/day), and Subject 9 (100 μ g/kg/day), respectively.
- No loss in CD16 expression on subject's NK cells. No need for supplemental NK cell therapy.

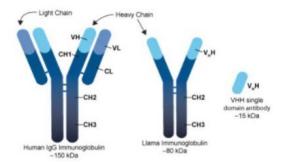


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CAMELID ANTIBODIES - SECOND GENERATION TRIKE®

- Camelid antibodies are antibodies from the Camelidae family of mammals that include llamas, camels, and alpacas.
- Camelid antibody is made up of only 2 heavy chains. This is known as heavy chain $\lg G$ (hclgG). While these antibodies do not contain the CH1 region, they retain an antigen binding domain called the $V_H H$ region.
- ullet V_HH antibodies, also known as single domain antibodies or Nanobodies ullet , contain only the V_HH region from the camelid antibody.
- Therapeutic and Commercial Advantages of GTB-3650 as compared to first generation GTB-3550
 - · Improved potency and enhanced binding affinity
 - · Commercial manufacturing capabilities through Cytovance
 - · Proprietary molecule wholly owned by GT Biopharma
 - · Similar preclinical safety profile

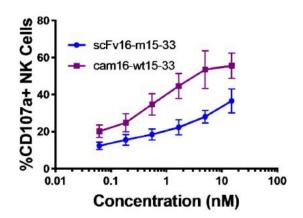
Source: https://www.rndsystems.com/products/llamabody-camelid-antibodies

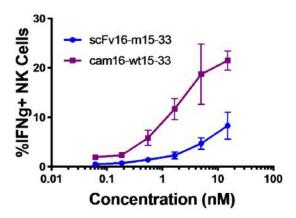




SECOND GENERATION TRIKE® (CAMELID) IMPROVES NK FUNCTION

CD 33+ HL60 Targets



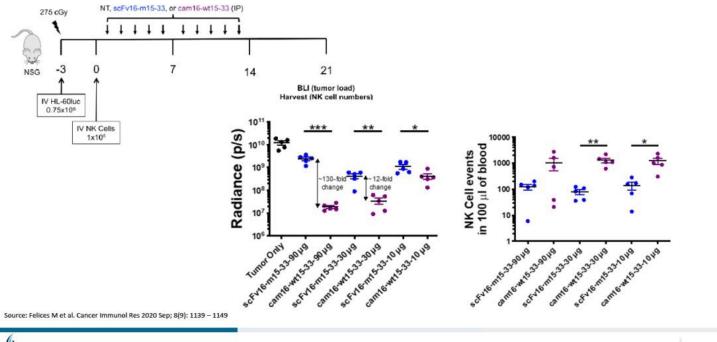


Source: Felices M et al. Cancer Immunol Res 2020 Sep; 8(9): 1139 - 1149



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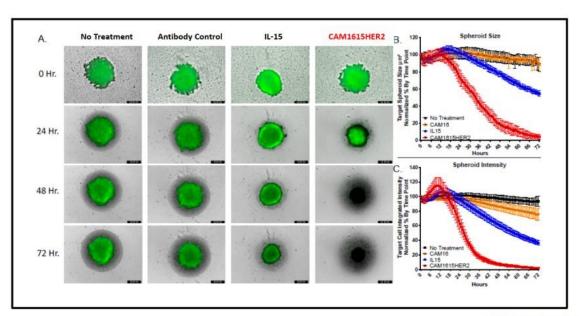
SECOND GENERATION TRIKE® (CAMELID) SUPERIOR IN-VIVO



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SECOND GENERATION TRIKE® (CAMELID) HIGHLY EFFECTIVE AGAINST HER2+ TUMORS

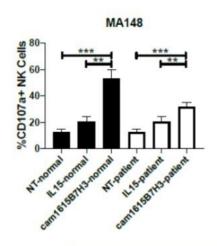


Source: Vallera DA et al. Cancer 2021 Aug 8; 13(16):3994

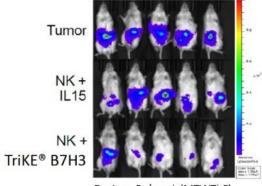
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PIPELINE TRIKE® B7H3: MULTI-CANCER STRATEGY



Day 21 After MA-148 Tumor Implant



Dosing: 5x/week (MTWThF) Schedule: 3 weeks

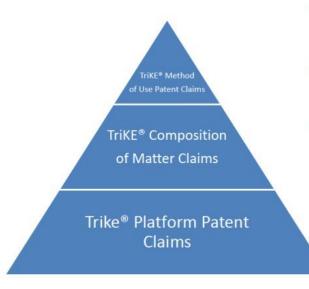
Significant killing of MA148 Ovarian Cancer by TriKE® B7H3

Source: Vallera DA et al. Cancer 2020 Sep 18;12(9):2659



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MULTI-LAYERED PATENT STRATEGY



TriKE® Method of Use Patent Claims

 Methods of use claims highlighting coverage for oncology and infectious disease therapeutic applications.

TriKE® Composition of Matter Patent Claims

 Composition of matter claims covering DNA and amino acid sequences for all TriKE™ therapeutic product opportunities.

TriKE® Platform Patent Claims

- Claims focused on simultaneously engaging and activating NK cells using a single therapeutic construct incorporating IL-15 to minimize toxicity and the need for co-administration of IL-15.
- Claims focused on target-directed NK cell killing and IL-15 trafficking to TME.

Two New Patents Issued (24 August 2021) Covering TriKE® Platform

- Patent No. 11,098,100 broad coverage for CD16, IL-15, and any targeting domain
- 2. Patent No. 11,098,101 broad coverage for any HIV target antigen



TriKE® Competitive Advantages

- The anti-CD16 component of the TriKE binds FcRγIII at high affinity compared to ADCC mediated strategies that bind at low affinity.
- ➤ CD16 +/- other receptor engagement does not result in proliferation of T-cells contributing to CRS.
- ➤ IL-15 provides NK cell specific proliferation with less bystander activity and has a greater safety profile than cytokine therapy.
- TriKE can be targeted to heme malignancies, solid tumors and infectious diseases.
- Overall therapeutic regimen costs the same as today's antibody therapies.







NK cell engager/antibody therapeutic strategies designed to engage CD16, NKG2D, or NKp30, but none of them co-stimulate CD16 and IL-15 simultaneously.





NK cell therapy. Significantly more expensive.



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EXPERIENCED MANAGEMENT TEAM

PROVEN RECORD IN BIOTECH, PHARMA, PRODUCT DEVELOPMENT, FINANCING





Gregory Berk, MD President R&D and Chief Medical Officer Verastem intellikine







Michael Handelman, CPA Chief Financial Officer IOVANCE OXIS



Jeffrey Miller, MD Chief Scientific Officer, Consultant UNIVERSITY OF MINNESOTA Driven to Discover



Gavin Choy, PharmD, MBA Chief, Clinical Development Officer







Abraxis









Target Directed NK Cell Immunotherapy NASDAQ: GTBP

10 September 2021