

(Print or Type Responses)

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

| OMB APPROVAL | | | | |
|--------------------------|--|--|--|--|
| OMB Number: 3235-0104 | | | | |
| Estimated average burden | | | | |
| nours per response | | | | |

INITIAL STATEMENT OF 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

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event Requiring

| 11/11/2020 | ool | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | lment, Date Original Day/Year) | | | | | | | |
| (Street) Officer (give title Other (specify below) Officer (give title Other (specify below) Applicable Line) X_Form filed by 0 | al or Joint/Group Filing(Check e) I by One Reporting Person by More than One Reporting Person | | | | | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owne | (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned | | | | | | | |
| 1. Title of Security (Instr. 4) 2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | Beneficial Ownership | | | | | | | |
| Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | |
| (Instr. 4) and Expiration Date (Month/Day/Year) Securities Underlying Derivative Security (Instr. 4) or Exercise Price of Derivative Security: Direct Security: | . Nature of Indirect Beneficial Ownership Instr. 5) | | | | | | | |
| Date Expiration Date Title Amount or Number of Shares Security (D) or Indirect (I) (Instr. 5) | | | | | | | | |

Reporting Owners

| | Relationships | | | |
|--|---------------|--------------|---------|-------|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other |
| Wendel Bruce C/O GT BIOPHARMA, INC. 9350 WILSHIRE BLVD., STE. 203 BEVERLY HILLS, CA 90212 | X | | | |

Signatures

| Bruce Wendel | 10/06/2021 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

No securities are beneficially owned

- If the form is filed by more than one reporting person, see Instruction 5(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).

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.