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): June 4, 2018

Cocrystal Pharma, Inc.

(Exact name of registrant as specified in its charter)

Delaware	001-38418	35-2528215
(State or other Jurisdiction	(Commission	(IRS Employer
of Incorporation)	File Number)	Identification No.)
1860 Montreal Rd, Tucker, GA		30084

(Address of principal executive offices)

(Zip Code)

Registrant's telephone number, including area code: (678) 892-8800

(Former name or former address, if changed since last report.):

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

[] Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

[] Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

[] Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

[] Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (17 CFR §230.405) or Rule 12b-2 of the Securities Exchange Act of 1934 (17 CFR §240.12b-2).

Emerging growth company []

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. []

Item 7.01 Regulation FD Disclosure

Senior executives of Cocrystal Pharma, Inc. (the "Company") will be delivering several presentations. The Company's investor presentation has been updated and is being furnished as Exhibit 99.1 hereto and is hereby incorporated by reference.

The information in this Current Report on Form 8-K (including exhibits hereto) shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act") or otherwise subject to the liabilities under such section, and shall not be deemed to be incorporated by reference into any filing of the Company under the Securities Act of 1933, as amended, or the Exchange Act.

Item 9.01 Financial Statements and Exhibits

(d) Exhibits.

Exhibit	Description
99.1	Cocrystal Pharma, Inc. Investor Presentation, dated June 2018

SIGNATURES

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.

Cocrystal Pharma, Inc.

Date: June 4, 2018

By: /s/ James Martin

Name: James Martin Title: Chief Financial Officer



Antiviral Therapies

Corporate Presentation June 2018

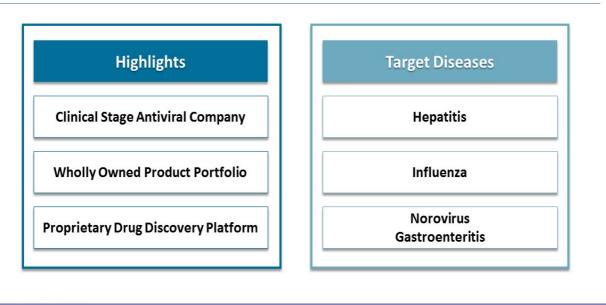
NASDAQ: COCP

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, including statements regarding the anticipated timing of our drug development programs, including 2018 milestones, and anticipated completion or initiation of studies, IND filings, and opportunities in the hepatitis C and influenza antiviral markets. Forward-looking statements are prefaced by words such as "expect," "plan," "intend," "anticipate," and similar words. Forward-looking statements are based on our current expectations and assumptions regarding our business, the economy and other future conditions. Because forward-looking statements relate to the future, they are subject to inherent uncertainties, risks and changes in circumstances that are difficult to predict. Our actual results may differ materially from those contemplated by the forward-looking statements for a variety of reasons, including delays in manufacturing created by third parties, the ability of clinical research organizations to recruit patients, and the failure to obtain adequate financing to fund our programs. Also see the risk factors contained in the Prospectus Supplement dated April 30, 2018, and our Form 10-K for the year ended December 31, 2017. We caution you, therefore, against relying on any of these forward-looking statements. They are neither statements of historical fact nor guarantees or assurances of future performance. We do not intend to nor do we undertake any duty to update these forward-looking statements.



2

Corporate Overview



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3

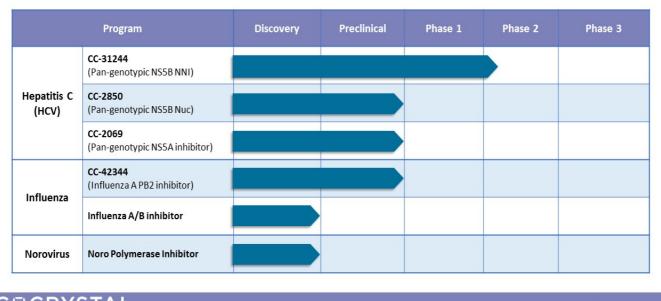
Investment Highlights

- Nobel Prize winning expertise leveraged to design first- and best-in-class antiviral drug candidates addressing well established and growing markets
- · Lead program CC-31244 for the treatment of hepatitis C infection entering Phase 2a in Q2 2018
 - Received IND clearance from FDA in Q1 2018
 - Topline data expected before year end
 - Exploring partnering opportunities in strategic territories
- Influenza candidate, CC-42344 is a novel PB2 inhibitor scheduled to enter Phase 1 in Q4 2018 for the treatment of influenza
 - Shown excellent antiviral activity against influenza A strains, including avian pandemic strains and Tamiflu resistant strains
- Company positioned to achieve multiple clinical and regulatory milestones in the near-term
- · Recently uplisted to Nasdaq Capital Market

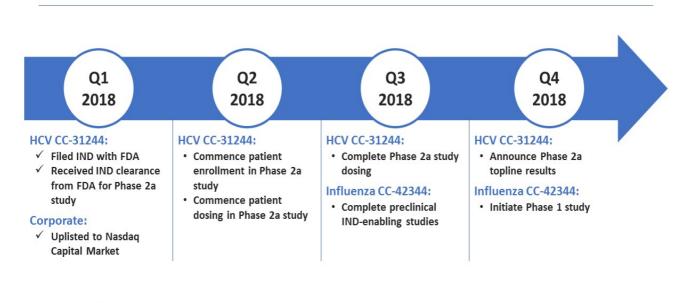


4

Robust Development Pipeline



Near-Term Milestones Expected to Drive Value



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6

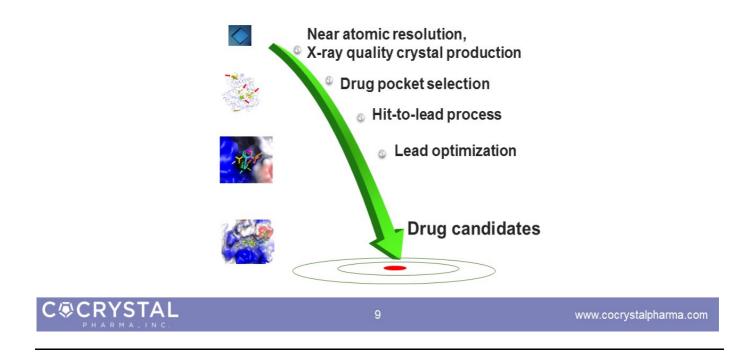
Seasoned Management Team

Gary Wilcox, Ph.D. Vice Chairman and Chief Executive Officer Over 35 years of executive biotech leadership experience and played a key role in the development of Cialis	icòs [®] Xoma	Cialis tadalafi UCLA uversy of California, Lee Angeles
Sam Lee, Ph.D.		
President	— • ®	_ ^
20 years of anti-infective drug discovery research experience and played a key role in the early development of phosphoinositide 3-kinase (PI3K) delta inhibitors	īcòs	Zydelig
James J. Martin, MBA, CPA	nims	() MOTUS ^a
Chief Financial Officer 25 years of finance and management experience including		
providing financial leadership to commercial-stage, publicly traded health science companies	SciVac	

Board of Directors

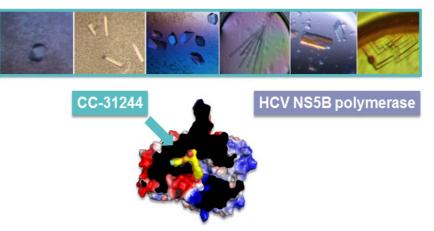
Raymond F. Schinazi, Ph.D. Chairman	Frances Winship Walters Professor of Pediatrics, Director, Laboratory of Biochemical Pharmacology and Director, HIV Cure Scientific Working Group at Emory University		
Gary Wilcox, Ph.D. Vice Chairman and Chief Executive Officer	Vice Chairman and Chief Executive Officer, Cocrystal Pharma, Inc.		
David S. Block, M.D. Director	President and Chief Executive Officer of Gliknik Inc.		
Phillip Frost, M.D. Director	Chairman and CEO of OPKO Health, Inc.		
Jane Hsiao, Ph.D. Director	Vice Chairman and Chief Technical Officer of OPKO Health, Inc.		
Steve Rubin Director	Executive Vice President-Administration and a director	of OPKO Health, Inc.	
	8	www.cocrystalpharm	

Cocrystal Technology Nobel Prize Winning Technology



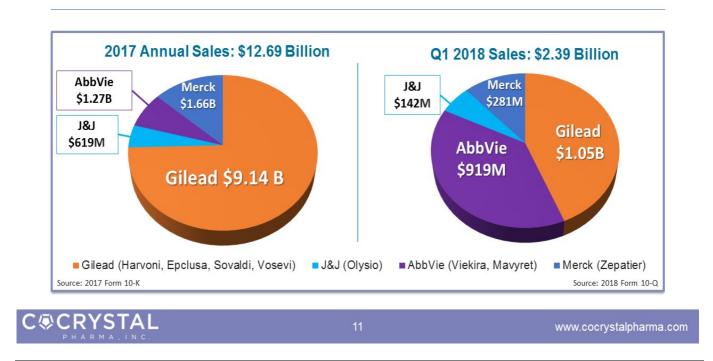
CC-31244: Broad Spectrum HCV NNI Demonstration of Cocrystal's Enabling Technology

HCV GT1 - GT6 NS5B polymerase crystals



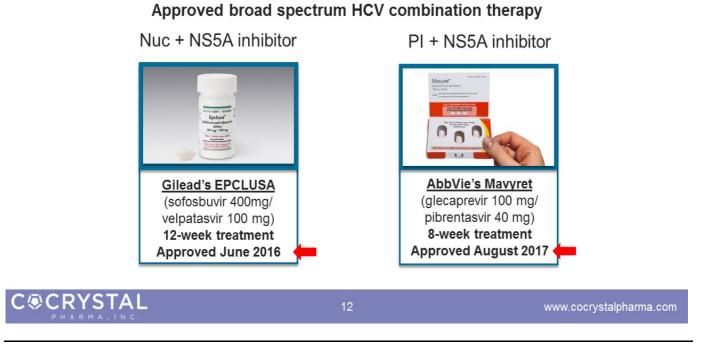
Proven track record for broad spectrum antiviral leads

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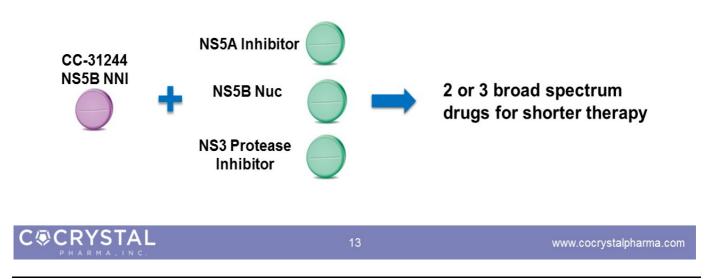
Hepatitis C Treatment Market Share

AbbVie's Mavyret Demonstrated a Shorter Treatment: From 12 Weeks To 8 Weeks



Cocrystal's HCV Strategy: Shorter Combination Therapy

Multiple opportunities in developing shorter combination therapy with approved HCV drugs



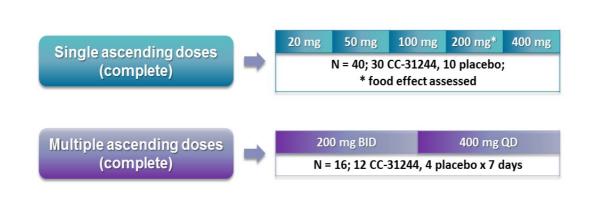
Cocrystal's Next Wave Combination Therapy: CC-31244 with Approved HCV Drugs

- · Potential best-in-class HCV NNI with a strong profile
 - Broad spectrum, potent NS5B polymerase inhibitor
 - Developed by Cocrystal's proprietary structure-based discovery platform
 - High barrier to drug resistance
 - Effective against known NNI drug resistant variants
 - Liver targeting
- · Acceptable safety and efficacy profiles in Phase 1 studies
- Potential for a shorter therapy with existing HCV combination therapy
- Received IND clearance from FDA in Q1 2018
- Phase 2a scheduled to commence Q2 2018



14

Phase 1a Study Completed

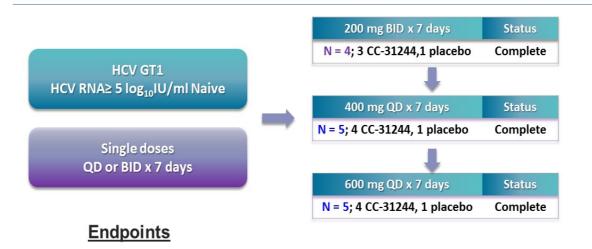


Endpoints

· Safety: adverse events (AEs) and laboratory abnormalities

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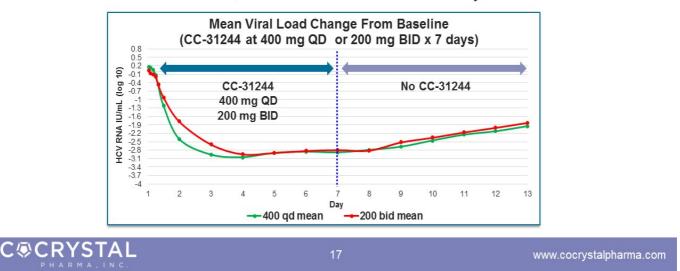
Phase 1b Study Completed



- · Efficacy: changes in HCV RNA viral load
- · Safety: adverse events (AEs) and laboratory abnormalities



- HCV RNA viral load decline of 3 logs by 48 hours
- · After the NNI treatment, the viral load levels were slowly increased



Best-in-Class Potential of Any NNI

Drug	Genotype	Dose (mg)	Treatment Duration (days)	Viral load reduction (Log ₁₀ IU/ml)
CC-31244 🗧	Genotype 1-6	400	듣 7 (QD)	-3.0
ABT-333* (Dasabuvir)	Genotype 1	400	3 (BID)	-1.08
		800	3 (BID)	-0.95
GS-9190 (Tegobuvir)	Genotype 1	40	3 (BID)	-1.0
		120	3 (BID)	-1.5

(*: approved DAA)

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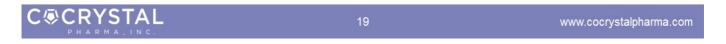
18

CC-31244 Phase 2a Study Design

 An open-label, Phase 2a study evaluating the safety, tolerability and preliminary efficacy of CC-31244 with approved HCV DAAs



- Endpoints
 - Efficacy: changes in HCV RNA viral load
 - · Safety: adverse events (AEs) and laboratory abnormalities
- Expect to commence patient enrollment in Q2 2018



HCV Summary and Conclusion

- Showed an acceptable safety profile in both healthy volunteers and GT1 patients up to 400 mg x 7 days
- No serious adverse events or discontinuations due to adverse events
- Demonstrated HCV RNA viral load reduction of ~ 3 logs by 48 hours
- Demonstrated a sustained post-treatment antiviral effect after the 7-day treatment
- Potential to be an important DAA in shorter HCV combination regimens

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20

New Antivirals For Influenza



- High mortality rate:
 - 1918 Spanish Flu, 20-100 million deaths
 - 1957 Asian Flu, 1-1.5 million deaths
 - 1968 Hong Kong Flu, 0.75-1 million deaths
 - 2009 Swine Flu, 0.15-0.5 million deaths
- Emerging influenza viruses
 - Highly virulent avian influenza viruses
 - Tamiflu-resistant influenza viruses
- Delayed vaccine development



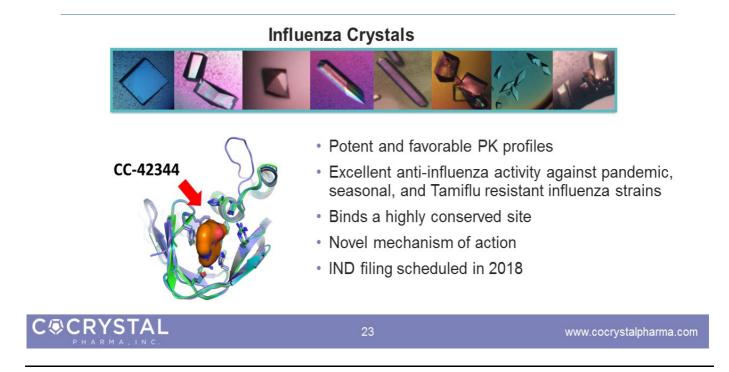
21

Great Opportunity in Influenza Antiviral Market

- · Seasonal and pandemic infection
 - 3-5 million cases of severe illness per year
 - 250,000 500,000 deaths worldwide*
- Approved influenza therapies have major limitation
- Multiple product routes of delivery, inhalation, oral, and intravenous (IV)
- Stock piling and prophylactic market in addition to standard of care

*Reference: https://www.cdc.gov/flu/about/disease/burden		
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Influenza A Preclinical Lead CC-42344



Early Stage Programs

- Influenza A/B Inhibitor Program
 - Influenza cocrystals developed
 - Structure-based lead discovery ongoing
 - IND filing in 2019
- Noro Polymerase Inhibitor
 - Structure-based NNI discovery ongoing
 - Multiple polymerase crystals developed
 - Noro nucleoside lead discovery ongoing
 - IND filing in 2019



24

Cocrystal-HitGen-InterX Collaboration: Aimed at Rapid Lead Discovery Process







- Combines synergistic drug discovery platforms developed by Cocrystal-HitGen-InterX
- Break through hit-to-lead process
- · High quality novel leads will be developed



25

Selected Value Indicators Suggest Potential Significant Upside

Company Name	Ticker	Market Cap (M)*	Overview	Status
Arrowhead Pharmaceuticals	ARWR	\$938	Develops medicines to treat intractable diseases by silencing the genes that cause them	2 Phase 1 6 Preclinical
Arbutus BioPharma	ABUS	\$323	Biopharmaceutical company developing a cure for patients suffering from chronic hepatitis B infection	1 Phase 2 2 Preclinical 3 Discovery
Chimerix	CMRX	\$218	Developing novel antivirals for the growing population of immunocompromised patients,	1 Phase 3 2 Phase 2 1 Phase 1
Sinovac Biotech	SVA	\$445	Biopharmaceutical company that develops vaccines that protect against human infectious diseases	1 NDA post Phase 3 preliminary data 1 IND approval 2 IND filed
Spring Bank Pharmaceuticals	SBPH	\$178	Discovery and development of a novel class of therapeutics using a proprietary small molecule nucleic acid hybrid, or SMNH	2 Phase 2 3 Preclinical
*As of 5/31/2018				

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* Based on May 31, 2018 closing price of \$2.25 per share.
 ** Based on May 31, 2018 Yahoo Finance.



27

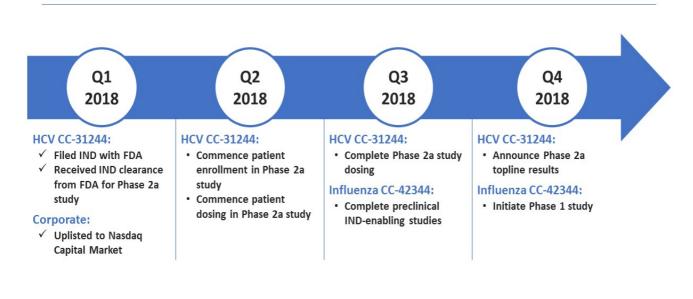
COCP Capitalization Table

Capitalization Table (As of May 31, 2018)	# of Shares	WAEP	\$ Value	% of Fully Diluted
Common Shares Outstanding (Directors & Officers)	15,219,800			49.75%
Common Shares Outstanding (Other)	14,703,276			48.06%
Warrants	243,375	\$10.28	\$2,501,895	0.80%
Stock Options	425,637	\$12.44	\$5,294,924	1.39%
Fully Diluted Shares Outstanding	30,592,088			100%



28

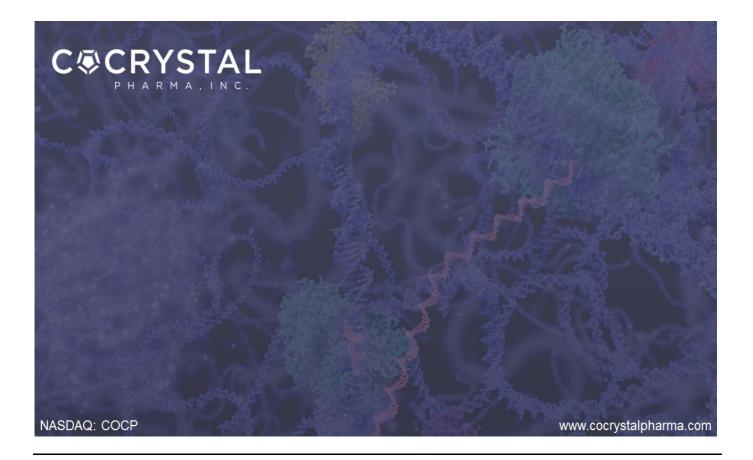
Near-Term Milestones Expected to Drive Value

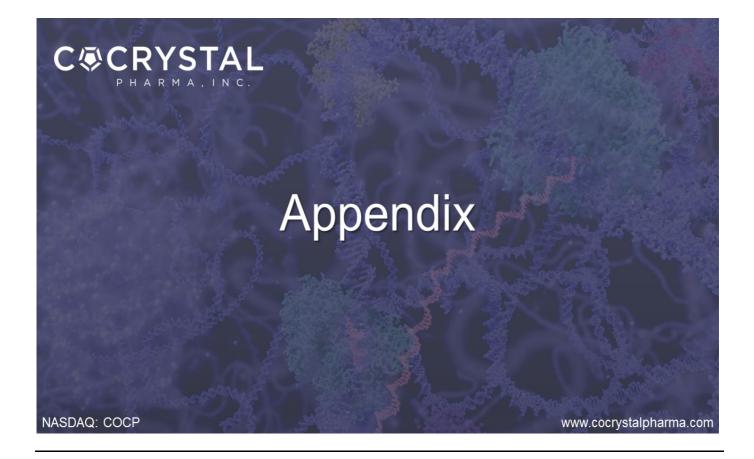




29







Scientific Advisors

onnatopile veninde, Pli.D.				
Christophe Verlinde, Ph.D.	University of Washington. Associate Professor, Departme	ent of Structural Biology		
Roland Strong, Ph.D.	Fred Hutchinson Cancer Research Center. Professor, De	partment of Structural Biology		
Gary Schoolnik, M.D.	Stanford University School of Medicine. Professor & Chief, Division of Geographic Medicine & Infectious Diseases; Professor, Microbiology & Immunology			
Bob Lehman, Ph.D.	Stanford University School of Medicine. Professor, Department of Biochemistry. Member of the National Academy Sciences			
Baek Kim, Ph.D.	Director of Center for Drug Discovery, Professor of Pediat School of Medicine. Clinical and Translational Science and			
Michael Levitt, Ph.D.	Stanford University School of Medicine. Professor, Department of Structural Biology. Nobel Laureate in Chemistry, Member of the National Academy Sciences, and fellow of the Royal Society, London			
Roger Kornberg, Ph.D. Chief Scientist, Chairman of Scientific Advisory Board	Professor of Structural Biology at Stanford University School of Medicine. Nobel Laureate in Chemistry, Member of the National Academy of Sciences, and the American Academy of Arts an Sciences			

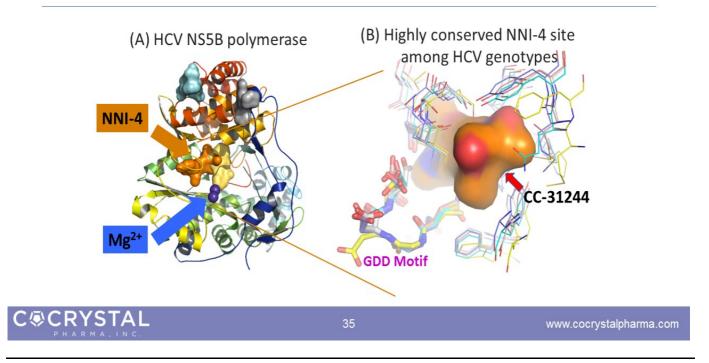
Cocrystal Patent Portfolio

- HCV: 15 patents including three PCT applications
- Influenza: 2 patent applications filed
- Noro: patent application(s) will be filed in 2018



34

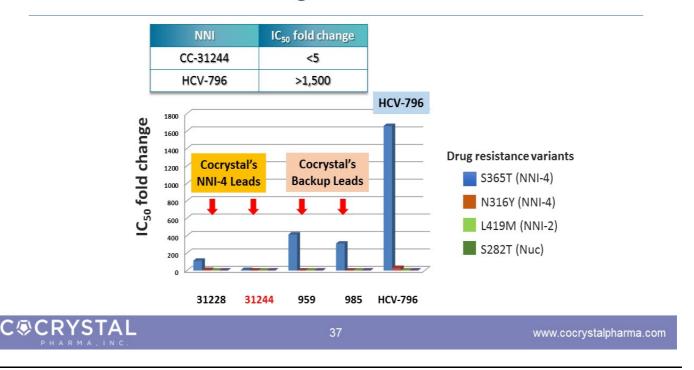
CC-31244 Binds To a Highly Conserved Drug Binding Site (NNI-4) of NS5B Polymerase



CC-31244 HCV replicon EC₅₀ fold change, <6 fold

S		HCV replicon/o	chimeric replicon E	C ₅₀ results	
	Genotype	CDI-31244 EC ₅₀ , mM	EC₅₀ Fold change	Sofosbuvir EC ₅₀ , mM	EC ₅₀ fold change
	1b	0.005	1.0	0.042	1.0
	1a	0.009	1.8	0.034	0.8
	2b	0.026	5.2	0.028	0.66
	3a	0.011	2.2	0.14	3.2
	4a	0.021	4.2	0.047	1.1
	5a	0.002	0.4	0.075	1.7
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CC-31244 Exhibits Excellent Activity Against Common NNI and Nuc Drug Resistant Variants



GT1b NS5B C445F: The Major Drug Resistance Variant of CC-31244

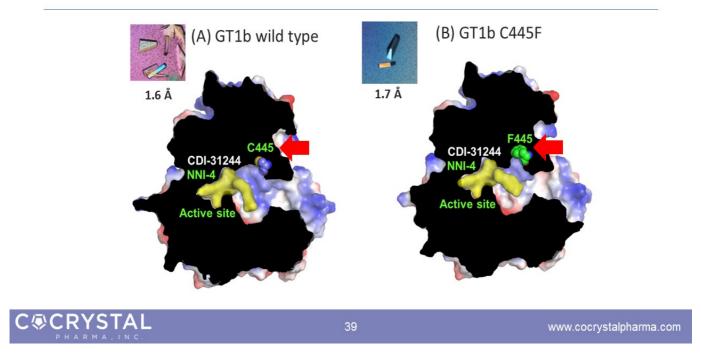
 HCV GT1b replicons containing NS5B variants identified by CC-31244 resistant colony selection

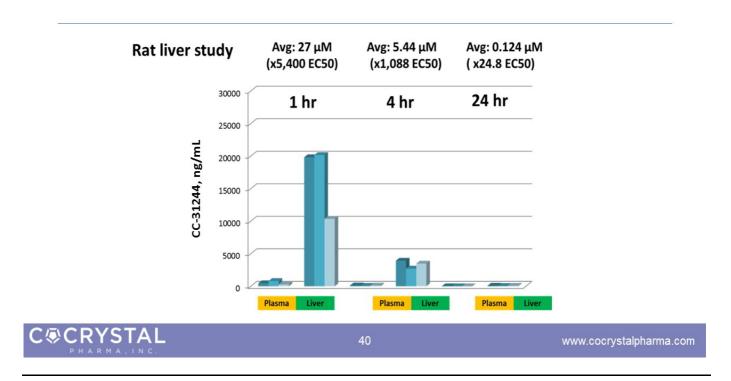
HCV replicon	GT1b C445F/S549G EC ₅₀ μM	GT1b EC ₅₀ μM	EC ₅₀ fold change
CC-31244	0.08	0.005	16 🛑
Purified NS5B polymerase	GT1b C445F IC ₅₀ µМ	GT1b IC ₅₀ µМ	IC ₅₀ fold change
CC-31244	0.23	0.24	0.94 🛑



38

CC-31244 Binding Mode: GT1b Drug Resistant NS5B C445F

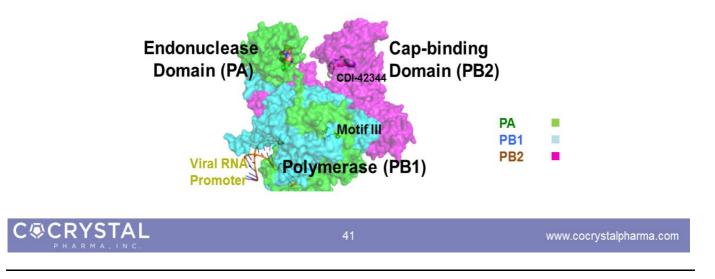




CC-31244 Exhibits Excellent Liver Targeting

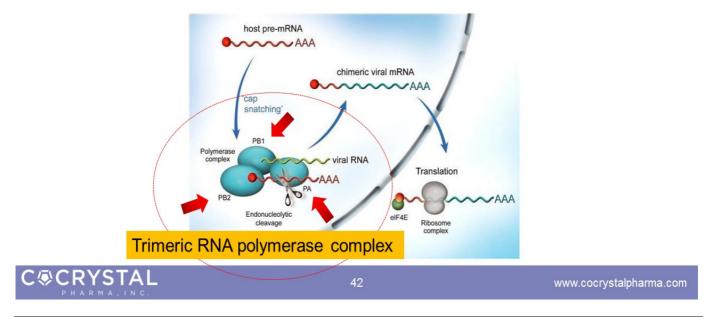
Cocrystal Influenza Program

- Influenza A PB2 lead, CC-42344: IND filing scheduled in 2018
- Influenza A/B PA: Discovery stage



Polymerase Complex (PB2:PA:pb1) Is Essential For Influenza Viral Replication

• Polymerase: cap binding (PB2) + endonuclease (PA) + polymerase (PB1)



CC-42344 Met Preclinical Lead Selection Criteria

Properties	Selection criteria				
Pharmacological properties	 Good antiviral activity (EC50, single digit nanomlar) High-affinity binding to a highly conserved drug binding site Broad spectrum against seasonal and pandemic influenza trains Excellent antiviral activity against Tamiflu resistant influenza strains Selective 				
Pharmacokinetics	 Favorable PK properties Adequate half-time and biodistribution Potential for inhalation, oral, and IV administration 				
Chemical properties	Stable moleculeSuitable for API scale up and manufacturing				
Safety and toxicity	 Excellent profile for ADMET Absence of obvious cytotoxicity and cardiac toxicity Absence of obvious toxicity in animal studies 				



43

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Approved Influenza Antivirals

Antiviral	Developer	MOA/Dosing
Oseltamivir (Tamiflu)	Gilead/ Genentech	Oral neuraminidase Inhibitor/75 mg bid for five days
Zanamivir (Relenza)	Biota/ GSK	Inhaled neuraminidase inhibitor/ 5 mg inhalation bid for five days
Peramivir (Rapivab)	Biocryst/ Shionogi	A single-dose intravenous neuraminidase inhibitor/600 mg IV
Favipiravir (Avigan, T-705) (Approved in Japan)	Toyama	Nuc, polymerase inhibitor/1,200 mg bid, followed by 600 mg bid for five days
Baloxavir marboxil (Xofluza, S-033188) (Approved in Japan)	Shionogi/ Roche	Oral PA (endonuclease) inhibitor/ 80 mg orally once
PHARMALINC.	44	www.cocrystalpharma

Influenza Clinical Landscape: CC-42344 Can Be Developed For Inhalation, IV, and Oral

- Key players: J&J (PB2 and PA) AND Shionogi/Roche (PA)
- Other companies: Merck, Gilead, and Novartis

Antiviral	Developer	Route	Stage	MOA/Indication
Pimodivir (VX-787 or JNJ-636233872)	1%1	Oral (600 mg/ twice-daily)	Phase 2	PB2 inhibitor/ Influenza A
S-033188	Shionogi/ Roche	Oral (80 mg/ Once-daily)	Approved in Japan	PA inhibitor/ Influenza A&B
AL-794	1&1	Oral (50, 150 mg/ twice-daily)	Phase 1	PA inhibitor/ Influenza A&B
CC-42344	СОСР	Inhalation, Intravenous, Oral	Preclinical	PB2 inhibitor/ Influenza A

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45

In Vitro Potency Comparison: Cocrystal's Leads vs VX-787

	181	Cocrystal Preclinical Lead	+	Cocrystal's k	oackup PB2 i	nhibitors	→
Influenza strain	VX-787 EC50 nM	42344 EC50 nM	42343 EC50 nM	42487 EC50 nM	42500 EC50 nM	42530 EC50 nM	42534 EC50 nM
Pandemic H1N1 Influenza A/CA/07/2009	2.4	0.12	5	0.9	2.7	ND	ND
H1N1 Influenza PR/8/34	1	1	1.2	1.2	2	0.5	5
Pandemic H5N1 Influenza A/VN/1193/ 2004	<3.2	<3.2	<3.2	<3.2	<3.2	<3.2	<3.2

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46

CC-42344 Shows Broad Spectrum Antiviral Activity Against Pandemic Influenza Strains

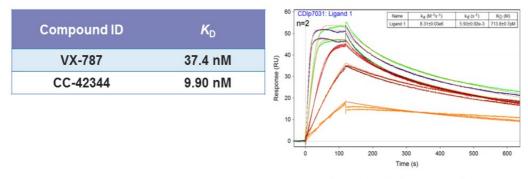
Influenza Serotype	Strain	CC-42344 EC50, nM	VX-787 EC50, nM
H5N1	Duck/MN/1524/81	8.6	0.07
H5N1- Amantadine resistant	Duck/MN/1524/81	<3.2	<3.2
H5N1	Gull/PA/4175/83	4.5	0.17
H5N1	Hong Kong/213/2003	<3.2	<3.2
H5N1	Thailand/16/2004	<3.2	<3.2
H5N1	A/VN/1194/2004	1.3	6.6
H7N7	Netherlands/219/2013	5.6	<3.2
H7N9	Shanghai/2/2013	5.4	<3.2
H7N9	Anhui/1/2013	<3.2	<3.2
H7N9	Taiwan/1/2013	<3.2	<3.2

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47

CC-42344 Exhibits Greater Affinity Than VX-787

• Highly sensitive biophysical method (SPR technology) was applied to determine the affinity (Kd) of CC-42344 to the PB2 protein



Sample H1N1 Sensorgram data



48