# FORM 4

#### Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue. See

Instruction 1(b).

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

OMB APPROVAL						
OMB Number:	3235-0287					
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hours per response	0.5					

### 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

(Print or Tyj	pe Response	es)									-					
1. Name and Address of Reporting Person *- Rubin Steven D				2. Issuer Name and Ticker or Trading Symbol Cocrystal Pharma, Inc. [COCP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) 4400 BISCAYNE BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 09/21/2018									e title below)		her (specify belo	w)
				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
MIAMI, FL 33137 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							Acquired,	ired, Disposed of, or Beneficially Owned				
1.Title of So (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Day any (Month/Day/		ate, if C	Tranode nstr. 8	8) (1	. Securities A) or Dispos Instr. 3, 4 an	sed of od 5)	f (D) Own Tran	5. Amount of Securit Owned Following Re Transaction(s) (Instr. 3 and 4)		ed	Ownership Form:	Beneficial Ownership
Reminder: I	Report on a	separate line for eac	Table II - l	Derivativ	e Se	curities	Acqu	Person contain form d	is who res ned in this isplays a c	forn curre Benef	n are not ently valid ficially Ow	required OMB c	to respo	nd unless t		474 (9-02)
(Instr. 3)	Conversion	rcise (Month/Day/Year) of utive	3A. Deemed Execution Date, i	4. if Transaction Code		5. Number		Expiration Date (Month/Day/Year)		nd '	7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	(Instr. 4)
				Code	v	(A)	(D)	Date Exercisabl	Expiration Date	n ,	Title	Amount or Number of Shares				
Stock Options (Right to Buy)	\$ 2.78	09/21/2018		A		50,000		<u>(1)</u>	09/20/20	028	Common Stock	50,000	\$ 0	50,000	D	
Repor	ting O	wners	Relatio	nshins												

D C N (All	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Rubin Steven D 4400 BISCAYNE BOULEVARD MIAMI, FL 33137	X					

## **Signatures**

/s/ Steven D. Rubin	09/24/2018
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) The stock options vest as follows: 1/4 will vest on the one year anniversary of the grant date and the remaining 3/4 will vest in 12 equal quarterly increments.

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.