# 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): January 9, 2017

### Cocrystal Pharma, Inc.

(Exact name of registrant as specified in its charter)

<u>Delaware</u> (State or other Jurisdiction of Incorporation)	000-55158 (Commission File Number)	35-2528215 (IRS Employer Identification No.)		
1860 Montreal Rd, Tucker, GA (Address of principal executive offices	s)	30084 (Zip Code)		
Registrant's telep	hone number, including area code: (770) 89	2-8800		
(Former name	or former address, if changed since last repo	ort.):		
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 und	der 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))				
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### Item 7.01 Regulation FD Disclosure

Cocrystal Pharma, Inc. (the "Company") will be presenting information about the Company's antiviral therapies to investors in connection with the 35th Annual J.P. Morgan Healthcare Conference taking place in San Francisco, California from January 9-13, 2017. A copy of the presentation is included as an exhibit to this report. In addition, the presentation materials may be accessed on the Company's website, www.cocrystalpharma.com, by selecting "News," and then "Presentations."

### Item 9.01 Financial Statements and Exhibits

(d) Exhibits.

Exhibit No. Exhibit

99.1 Presentation dated January 9, 2017

### **SIGNATURES**

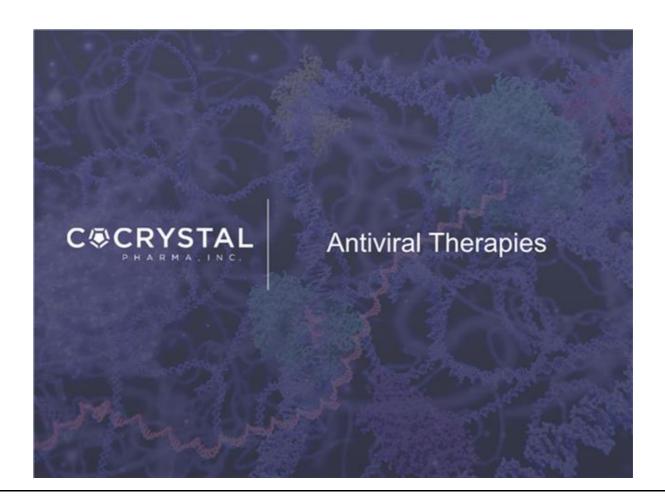
Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

Date: January 9, 2017

Cocrystal Pharma, Inc.

By: /s/ Walt A. Linscott Name: Walt A. Linscott

Title: General Counsel and Secretary



# Forward Looking Statements

· This presentation contains forward-looking statements, including the timing of our drug development programs. Risks include, but are not limited to, delays in manufacturing created by third parties and the ability of clinical research organizations to recruit patients. Forward-looking statements also are prefaced by words such as "expect," "plan," "intend," "anticipate," and similar words. Forwardlooking 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 the risk factors contained in our Form 10-K, as amended, for the year ended December 31, 2015, and our Form 10-Q for the quarter ending September 30, 2016. 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. Except as required by applicable securities laws, we do not undertake any duty to update these forwardlooking statements.

# **Opportunities**

Significant unmet medical needs across a variety of viral infections

### Influenza A & B

Seasonal and pandemic

3 - 5 million infections/year

Estimated economic impact of seasonal flu in US: \$50B to \$150B

### Hepatitis B & C

Leading causes of liver failure and liver cancer

Chronic infections >100 million HCV >400 million HBV

Opportunity for shorter duration in HCV and a cure in HBV

### **Norovirus**

- Chronic (potentially orphan indication)
- · Acute gastroenteritis

>250 million acute cases/year

No treatment available Economic cost in the US alone >\$5 Billion

Reference: https://www.cdc.gov/flu, www.cdc.gov/hepatitis, www.cdc.gov/norovirus

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# **Company Highlights**

- Clinical stage antiviral company
- Multiple opportunities in different viral diseases

Influenza PB-2 inhibitors, PA inhibitors, PB-1 inhibitors

Hepatitis C Non-nucleoside inhibitors, nucleoside inhibitors,

helicase inhibitors, NS5A inhibitors

Norovirus Nucleoside inhibitors, non-nucleoside inhibitors

Hepatitis B CRISPR-Cas 9

# Next Wave CC-31244 Combination Therapy with Existing HCV DAAs

- Potential best-in-class HCV NNI with a strong profile
  - Pan-genotypic, 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 I studies
- Potential for an ultra-short therapy with existing HCV DAAs
- Phase 2a ready and open for collaboration

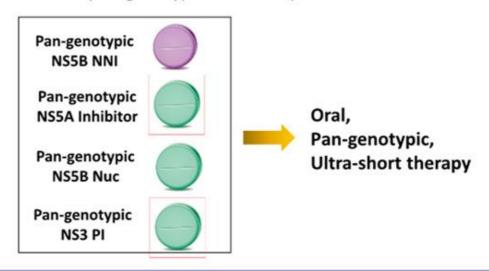
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### **HCV DAA Combinations**

Multiple opportunities in developing combination ultra-short, all oral pan-genotypic cure with partners



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# CC-31244 Phase la Clinical Trial Update

- A single- and multiple-dose assessment of the safety and pharmacokinetics of pan-genotypic NNI, CC-31244
  - Single-dose completed: five cohorts of healthy volunteers at 10, 50, 100, 200, and 400 mg
  - Multiple-dose completed: two cohorts of healthy volunteers at 200 mg x 7 days and 400 mg x 7 days)
  - Placebo or CC-31244 were well tolerated across all dose groups
  - No serious adverse events observed; no treatment discontinuations occurred

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# CC-31244 Phase Ib Clinical Trial Update

- Proof-of-concept Phase 1b study near completion
  - HCV infected subjects with minimal fibrosis and no significant co-morbidities
  - Repeat-dose, randomized, monotherapy trial (400 mg QD x 7 days)
  - Substantial and durable antiviral effect with an average 3 log orders by 48 hours after dosing
  - No viral breakthrough observed

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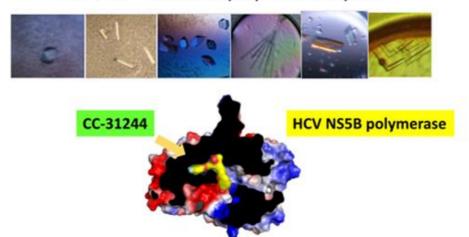
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# Pan-genotypic NNI, CC-31244:

Demonstration of Cocrystal's Enabling Technology

HCV GT1 – GT6 NS5B polymerase crystals



Proven track record for high quality antiviral leads

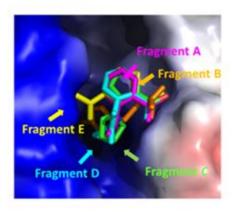
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# Crystallography Technology Platform

### **Initial HCV hits**



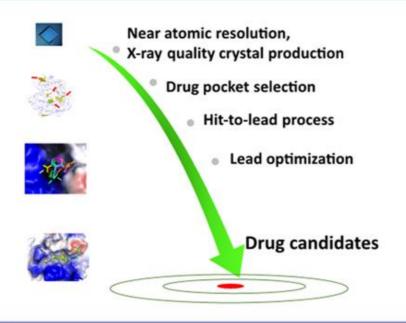
- Ability to <u>quickly grow</u> ultra-high resolution crystals of replication enzymes
- Rapid turnaround of structural information through highly automated X -ray data processing and refinement
- Discovery of <u>novel binding sites</u> overlay structure of fragments bound to novel sites
- Provides 3D structure of inhibitor complexes at <u>near-atomic resolution</u> – provides immediate insight to guide drug discovery

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## Structure-Based Drug Discovery Process: Investing on Attractive Drug Binding Pockets



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## **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\*
- Total estimated economic impact of seasonal flu in US: \$87 billion\*
- Approved influenza therapy has limitation

<sup>\*</sup>Reference: https://www.cdc.gov/flu/about/disease/burden

# Influenza: Still Significant Unmet Need

 Approved influenza antivirals administered early, within 48 hours of onset of Flu symptoms

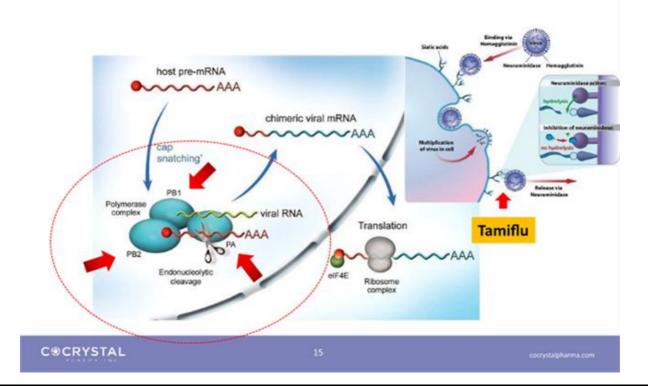
Antiviral	Developer	MOA/Dosing
Oseltamivir	Gilead/	Oral neuraminidase
(Tamiflu)	Genentech	Inhibitor/75 mg bid for five days
Zanamivir	Biota/	Inhaled neuraminidase inhibitor/
(Relenza)	GSK	5 mg inhalation bid for five days
Peramivir	Biocryst/	A single-dose intravenous
(Rapivab)	Shionogi	neuraminidase inhibitor/600 mg IV
Favipiravir	Toyama	Nuc, polymerase inhibitor/1,200
(Avigan, T-705)		mg bid, followed by 600 mg bid for
(Approved in Japan)		five days

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## **Desirable Properties For Influenza Antivirals**

- Superior pharmacological properties
  - Broad spectrum against pandemic and seasonal influenza strains
  - Efficacious against neuraminidase inhibitor (Tamiflu) resistant strains
  - Novel mechanism of action
- Flexible drug administration routes. i.e., oral, inhalation, and/or IV
- Satisfactory profile for safety and toxicity
- Excellent chemical properties

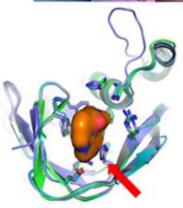
# Polymerase Complex Is Essential For Influenza Viral Replication



### Influenza A Preclinical PB-2 Lead Selected

### Influenza PB2 crystals





Influenza PB-2: PB-2 inhibitor

- CC-42344 selected as preclinical lead
- Favorable PK profiles
- Excellent anti-influenza activity against pandemic, seasonal, and Tamiflu resistant influenza strains
- Binds a highly conserved PB2 site
- Novel mechanism of action

# **Early Stage Programs**

- CRISPR-Cas9 program
  - In-licensed from Duke University and Emory University for treatment of HBV and HPV
  - POC animal model studies will be initiated.
- Norovirus program
  - Structure-based NNI discovery ongoing
  - Noro and Norwalk polymerase crystals developed
  - Noro nucleoside lead discovery ongoing







Human Noro Human Norwalk

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# Summary

- HCV NNI CC-31244: Complete the ongoing Phase 1b study, and initiate Phase 2a
- Influenza PB-2 CC-42344: Lead candidate selected and moving to initiate IND-enabling studies
- Open to partner(s) for HCV assets in strategic locations
- Continue Noro, and CRISPR-Cas9 (HepB and HPV) programs