FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 Ty	pe Response	3)														
1. Name and Address of Reporting Person* PRENDERGAST FRANKLYN G				2. Issuer Name and Ticker or Trading Symbol NeuBase Therapeutics, Inc. [NBSE]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner					
(Last) (First) (Middle) C/O 700 TECHNOLOGY DRIVE, THIRD FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 09/09/2020							Officer (giv	e title below)	Ot	her (specify below	v)	
(Street) PITTSBURGH, PA 15219				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 iired, Disposed of, or Beneficially Owned					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						Acquired,						
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date,) any (Month/Day/Yea		ate, if (4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		(D) Owner Trans	. Amount of Securities Beneficiall Owned Following Reported Transaction(s)			Ownership Form:	7. Nature of Indirect Beneficial	
					(Year)	Cod	e V	Amount (A)		(Instr	(Instr. 3 and 4)			\ /	Ownership Instr. 4)	
									form are n	t requ		llection of respond		form		` <u>'</u>
			Table II -	· Derivat	ive So	ecurities	Acaı	in this displa	ys a curren	ly vali	uired to r lid OMB o	respond control r	unless the	e form		· · ·
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	4. Transac Code	etion	5. Numb of Deriv Securitie Acquire or Dispo of (D)	rants, per rative es d (A) psed	in this displa aired, Disp options, c	osed of, or Endership osed of, or Endership osed of, or Endership osed osed osed osed osed osed osed osed	enefici curitie 7. of Se	uired to r lid OMB o	respond control r ed Amount	unless the umber.	9. Number Derivative Securities Beneficiall Owned Following	Ownersh Form of Derivativ Security: Direct (I	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	etton (5. Numb of Deriv Securities Acquire or Dispo	rants, per rative es d (A) psed	in this displa	ys a curren osed of, or E onvertible se ercisable and Date ay/Year) Expiration	enefici curitie 7. of Se (Ir	uired to r lid OMB of cially Own es) Title and f Underlyine ecurities	respond control r ed Amount	8. Price of Derivative Security	9. Number Derivative Securities Beneficiall Owned	Ownersh Form of Derivativ Security: Direct (I or Indire	of Indire Beneficia Ownersh (Instr. 4)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
PRENDERGAST FRANKLYN G						
C/O 700 TECHNOLOGY DRIVE, THIRD FLOOR	X					
PITTSBURGH, PA 15219						

Signatures

/s/ Sam Backenroth, as attorney-in-fact for Franklyn G. Prendergast	09/11/2020
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) 25% of the total shares shall vest on the first anniversary of September 9, 2020, and the remaining shares shall vest on an equal monthly basis over the following 36 months

Remarks:

The power of attorney under which this form was signed is on file with the Commission.

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.