

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): February 17, 2015

DELMAR PHARMACEUTICALS, INC.

(Exact name of registrant as specified in its charter)

Nevada

000-54801

99-0360497

(State or Other Jurisdiction of Incorporation)

(Commission File Number)

(I.R.S. Employer Identification Number)

Suite 720-999 West Broadway
Vancouver, British Columbia
Canada V5Z 1K5
(Address of principal executive offices)

(604) 629-5989
(Registrant's telephone number, including area code)

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(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 (see General Instruction A.2. below):

- 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))
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Item 8.01 Other Events.

On February 17, 2015, DelMar Pharmaceuticals, Inc. held an earnings call. A copy of the presentation used during the earnings call is attached as Exhibit 99.1 hereto.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

Exhibit Number Description

99.1 Presentation

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.

DELMAR PHARMACEUTICALS, INC.

Dated: February 17, 2015

By: /s/ Jeffrey Bacha
Name: Jeffrey Bacha
Title: Chief Executive Officer



**Breakthrough
Cancer Therapeutics**

CORPORATE UPDATE CONFERENCE CALL AND WEBCAST

FEBRUARY 17, 2015

Any statements contained in this presentation that do not describe historical facts may constitute forward-looking statements as that term is defined in the Private Securities Litigation Reform Act of 1995. Any forward-looking statements contained herein or made in the course of the presentation are based on current expectations, but are subject to a number of risks and uncertainties. The factors that could cause actual future results to differ materially from current expectations include, but are not limited to, risks and uncertainties relating to the Company's ability to develop, market and sell products based on its technology; the expected benefits and efficacy of the Company's products and technology; the availability of substantial additional funding for the Company to continue its operations and to conduct research and development, clinical studies and future product commercialization; and, the Company's business, research, product development, regulatory approval, marketing and distribution plans and strategies. These and other factors are identified and described in more detail in our filings with the SEC, including, our current reports on Form 8-K.

We do not undertake to update these forward-looking statements made by us.

2015 Corporate Goals

CLINICAL:

- *Initiate Phase II/III FDA registration trial in refractory GBM*
- *Expand pipeline opportunity to NSCLC*

FINANCIAL:

- *Fully funded lead program*
- *National Exchange Listing (NYSEMKT or NASDAQ)*

COMMERCIAL:

- *Capitalize on VAL-083 commercial opportunity in China*
- *Continue to strengthen our IP portfolio*

VAL-083 Recent Clinical Highlights: Preparing for GBM Registration Studies and Expansion into NSCLC

REFRACTORY GLIOBLASTOMA MULTIFORME (GBM)

- ✓ Reported first observation of a dose limiting toxicity in the ongoing Phase I/II clinical trial with VAL-083
- ✓ Preparation underway for advancement of VAL-083 to registration directed clinical trials
- ✓ Presented an update on the ongoing Phase I/II clinical trial at the Society for NeuroOncology Annual Meeting
 - ❖ New preclinical data supporting the favorable differentiation of VAL-083 versus temozolomide treatment of GBM

NON-SMALL CELL LUNG CANCER (NSCLC)

- ✓ Presented promising new data supporting VAL-083 activity in NSCLC at the AACR *New Horizons in Cancer Research* meeting
 - ❖ VAL-083 is superior to cisplatin in both tumor models that are sensitive and resistant to tyrosine kinase inhibitors and has synergistic effect in combination with cisplatin
 - ❖ Important clinical and market potential of VAL-083 in NSCLC

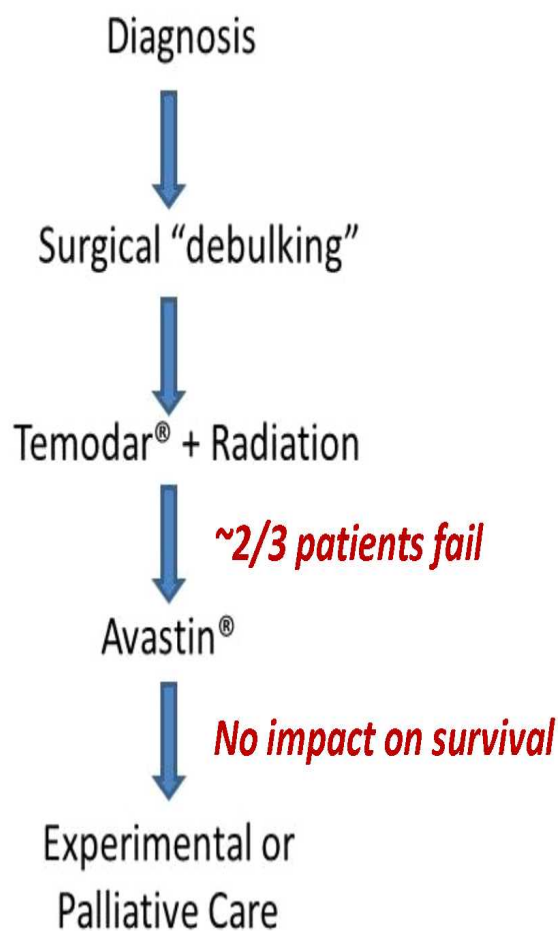
Glioblastoma Multiforme

DelMar's First Target Market for VAL-083

- GBM is the most common and aggressive form of brain cancer
- Large market opportunity:
 - ❖ Second and third-line therapy: \$200 million - \$500 million annual sales
 - ❖ Front line therapy: >\$1 billion annual sales
- Affects approx. 15,000 adults each year in USA
- Median survival without treatment = 4 ½ months
- Approximately half of patients tumors fail all other treatments

GBM: Current Treatment Paradigm

- *15,000 cases annually in USA*



VAL-083

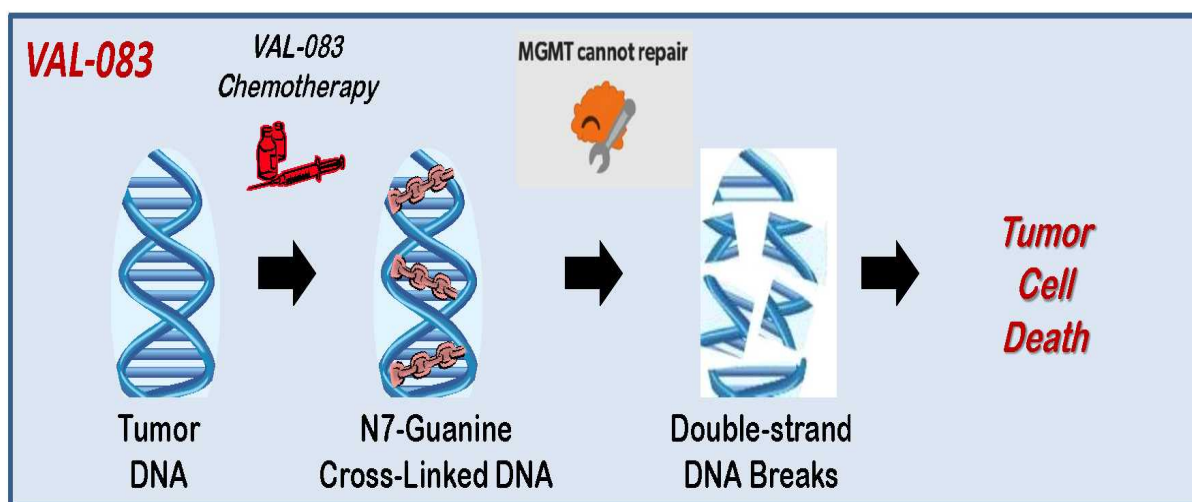
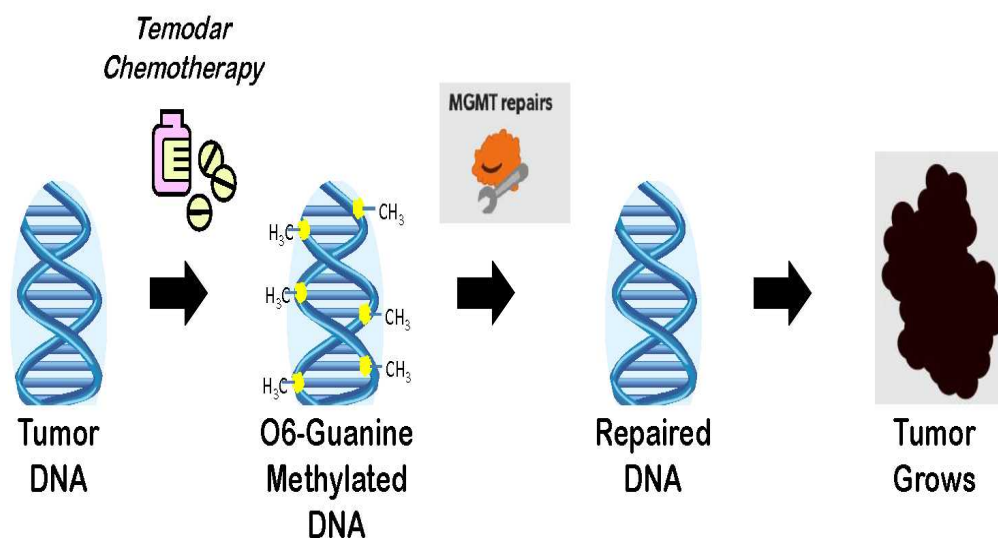
Historical NCI Phase II Studies support activity in GBM

Historical clinical trials demonstrate VAL-083 outcomes against GBM are as good or better than today's standard of care

- Stand-alone therapy
- Combination chemotherapy
- Combination with radiation therapy
- Recurrent disease



MGMT Enzyme: *The Culprit in Temodar® Failure*



VAL-083

Solving the Unmet Medical Need in GBM

DelMar's clinical and non-clinical data supports VAL-083 activity where other GBM treatments fail

- American Association of Cancer Research (AACR): 2012, 2013, 2014
- ASCO: 2014
- Society for NeuroOncology (SNO): 2012, 2013, 2014

- 15,000 GBM patients per year in USA
- 60% will fail to respond to front-line Temodar® therapy due to MGMT resistance
 - ❖ These patients have no viable therapeutic options and short survival
- VAL-083 is a chemotherapy that is known to be active against GBM
- VAL-083 treats GBM independent of MGMT resistance

VAL-083 Clinical Trial Overview



- Interventional Phase I/II, open-label, single-arm study in patients with recurrent GBM : 3 + 3 design
- Modernized dosing regimen
“Hit the Tumor Harder, More Often”
- Three Clinical Sites:
 - ❖ UC San Francisco: California
 - ❖ Sarah Cannon Cancer Research: Tennessee and Florida

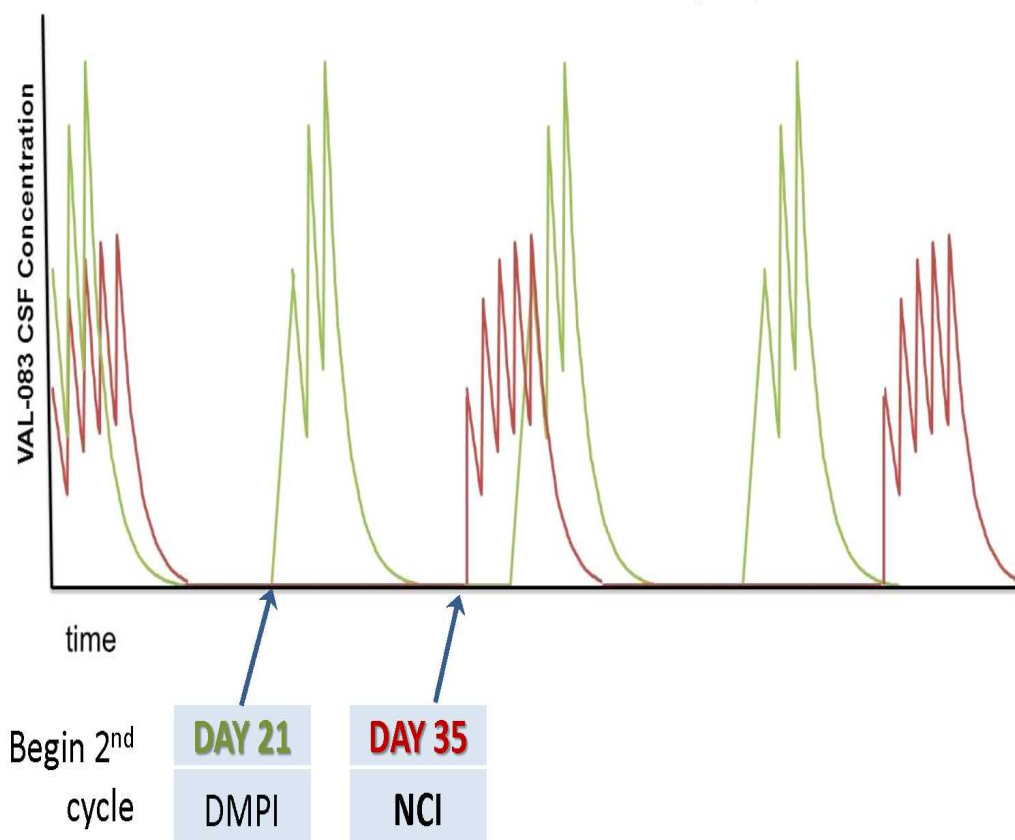
GOAL: Determine Dose for Advancement to Phase II/III Registration Trial

VAL-083 Clinical Trial

“Hit the Tumor Harder; More Often”

Illustrative Comparison of Dosing Regimen

- NCI regimen from published efficacy studies (1970s)
- DelMar Pharma “modernized” dosing regimen



VAL-083 Clinical Trial

“Hit the Tumor Harder; More Often”

DMPI GBM Phase I/II Trial Results to Date:

Successfully & Safely Dosing Higher than NCI in Clinical Trials

Society for Neuro-Oncology Annual Meeting (Nov 2014)

DOSE & STUDY	Single Dose	Acute Regimen (single cycle)		Comparative Dose (@ 35 days)	Dose Density (dose per week)	Status
NCI GBM (Eagan) daily x 5 q 5wks (cycle = 35 days)	25 mg/m ²	X 5 d =	125 mg/m ²	125 mg/m ²	25mg/m ² /wk	Historical Regimen MYELOSUPPRESSION REPORTED
DelMar VAL-083 daily x 3 q 3wks (cycle = 21 days)	30 mg/m ²	X 3 d =	90 mg/m ²	180 mg/m ²	30mg/m ² /wk	No DLT
	40 mg/m ²		120 mg/m ²	240 mg/m ²	40mg/m ² /wk	No DLT
	50 mg/m ²		150 mg/m ²	300 mg/m ²	50mg/m ² /wk	Ongoing DLT Observed
	60 mg/m ²		180 mg/m ²	360 mg/m ²	60mg/m ² /wk	planned

VAL-083 Clinical Trial: February 2015

First Observation of DLT = Nearing End of Dose Escalation

- Cohort 8 (50mg/m²): Fully enrolled (3 patients)
 - ❖ Safety window for observation of DLT: **35 days** from first dose of VAL-083
 - ❖ Clinical Observations:





PT	Status & Clinical Observations	
#1	Complete: Minimal toxicity	Similar to earlier cohorts
#2	Complete: Gr. 4 thrombocytopenia (DLT)	Nadir between day 14-21, rapid & spontaneous recovery
#3	Ongoing: Gr. 3 thrombocytopenia	Nadir between day 14-21, rapid & spontaneous recovery

- Next Steps (3+3 Design): *Enroll additional 3 patients @ 50mg/m²*
 - ❖ If **ANY** experience DLT, then **40mg/m²** dose will be MTD
 - ❖ If **NONE** experience DLT, then trial could advance to higher (60mg/m²) dose
 - ❖ **CAVEAT.** *If we observe **continued strong trends** toward DLT, then 50mg/m² would be confirmed as MTD*

Preparation underway for advancement to registration directed clinical trials

VAL-083 Clinical Trial: Next Steps

Refractory GBM – Target Timelines

KEY MILESTONES	2015	2016	2017
Achieve MTD*			
MTD Dose Expansion (14 pts)*			
FDA Advisory Meeting**			
Registration Directed Activities			
Registration Trial Enrollment	~12 months from initiation		
Data collection	~6 months from final patient enrollment		
NDA Preparation	~6 months from final data "lock"		
NDA Filing	Late 2016 / Early 2017		
Commercial Launch	2017		

*Timeline dependent on observation of DLT at 50mg/m² or 60mg/m² cohort (each cohort = 6 – 8 weeks)

**FDA guidance meeting to be requested during MTD Dose Expansion Cohort (to be scheduled w/in 75 days of request)

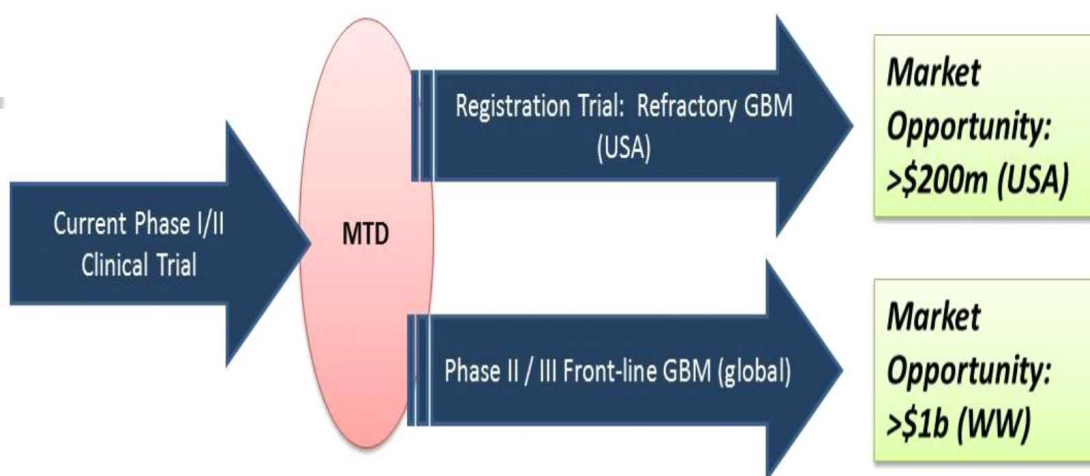
VAL-083 Clinical Trial: *Results to Date*

Summary:

- Initial signals for confirming MTD observed in 50mg/m² cohort
 - ❖ Expanding 50mg/m² cohort and initiating activities to prepare for Phase II/III registration trial
- DelMar is delivering significantly more VAL-083 to GBM tumors in comparison to historical NCI dosing regimen
 - ❖ Plasma exposure supports drug levels sufficient for anti-tumor activity in GBM tissues
- Observations of Clinical Response:
 - ❖ A portion of patients' tumors were observed to shrink or stop growing following initiation of VAL-083 treatment
 - *One of three GBM patients in each of cohort 6 (30 mg/m²) and in cohort 7 (40mg/m²) exhibited stable disease after 1 cycle of treatment (measured by RANO).*
 - *In earlier cohorts, DelMar reported that two patients exhibited a response (stable disease or partial response) with a maximum response of 28 cycles (84 weeks) and improved clinical signs prior to discontinuing due to adverse events unrelated to study.*

VAL-083: Expected Blockbuster Potential

- Current Phase I/II clinical trial in USA will lead to two development programs, unlocking billions in potential value



Competitive Landscape: GBM opportunity expected to generate significant upside for DMPI

Candidate	Company	Line of Therapy	Clinical Stage	Enterprise Value
Rindopepimut	CLDX	Newly diagnosed & relapsed	Phase III: newly diagnosed; Phase II: relapsed	\$ 1.4 B
DCVax®-L	NWBO	Newly diagnosed	Phase III	\$333 m
ICT-107 and ICT-121	IMUC	ICT-107: Newly diagnosed ICT-121: Relapsed	ICT-107: Phase III ICT-121: Phase I	\$13 m
TH-302	THLD	Avastin-refractory	Phase I/II	\$96 m
Aldoxorubicin	CYTR	Relapsed	Phase II	\$79 m
Onartuzumab	Roche	Relapsed	Phase II	\$138.5 B
ABT-414	AbbVie	Relapsed	Phase I /II	\$ 90.6 B
AMG 595	Amgen	Relapsed	Phase I	\$ 79.7 B

Expanding Our Pipeline: *Front-line GBM*

- Modernized dosing regiment from current Phase I/II study can be advanced for newly diagnosed patients
- VAL-083 may be a viable alternative front line therapy in GBM
 - ❖ VAL-083 is active independent of Temodar® resistance mechanisms
- Phase II/III clinical trial in newly diagnosed patients with unmethylated MGMT promoter
 - ❖ MGMT methylation correlates with response to Temodar®
 - ❖ 60 – 75% of newly diagnosed patients are unmethylated
- Potential Market Opportunity: >\$1 billion

Building Our Pipeline

Non-small cell lung cancer

- VAL-083 is approved in China for the treatment of lung cancer
- Lung cancer remains a leading cause of cancer death world-wide
 - ❖ Most common cause of cancer-related death in men and women
- >80% of lung cancer is non-small cell lung cancer
- Large market opportunity: >\$6 billion in annual sales
- Overall 5 year NSCLC survival rate: 15%
 - ❖ 40% of NSCLC is Stage IV at diagnosis with median survival <1 year & 5 year survival <2%
 - ❖ CNS metastases are a leading cause of NSCLC mortality
- **Standard of care: Surgery, radiation, platinum-based chemotherapy**
 - ❖ Tyrosine kinase inhibitors (TKIs) for EGFR mutated adenocarcinoma
- **Existing and new data support potential utility of VAL-083 in NSCLC**
 - ❖ Historical data from NCI-sponsored research demonstrates evidence of activity
 - ❖ New DelMar data presented at AACR meetings during 2014

Building Our Pipeline

Non-small cell lung cancer

➤ **Key Questions for NSCLC Market:**

- *How does the activity of VAL-083 compare to standard platinum therapy?*
- *Can VAL-083 be combined with platinum based therapy?*
- *Can VAL-083 treat NSCLC that is resistant to platinum-based chemotherapy or TKIs?*

Building Our Pipeline & Building Value: *Realizing Commercial Opportunity in China through Specific Data and Appropriate Promotions*

➤ NSCLC Next Steps

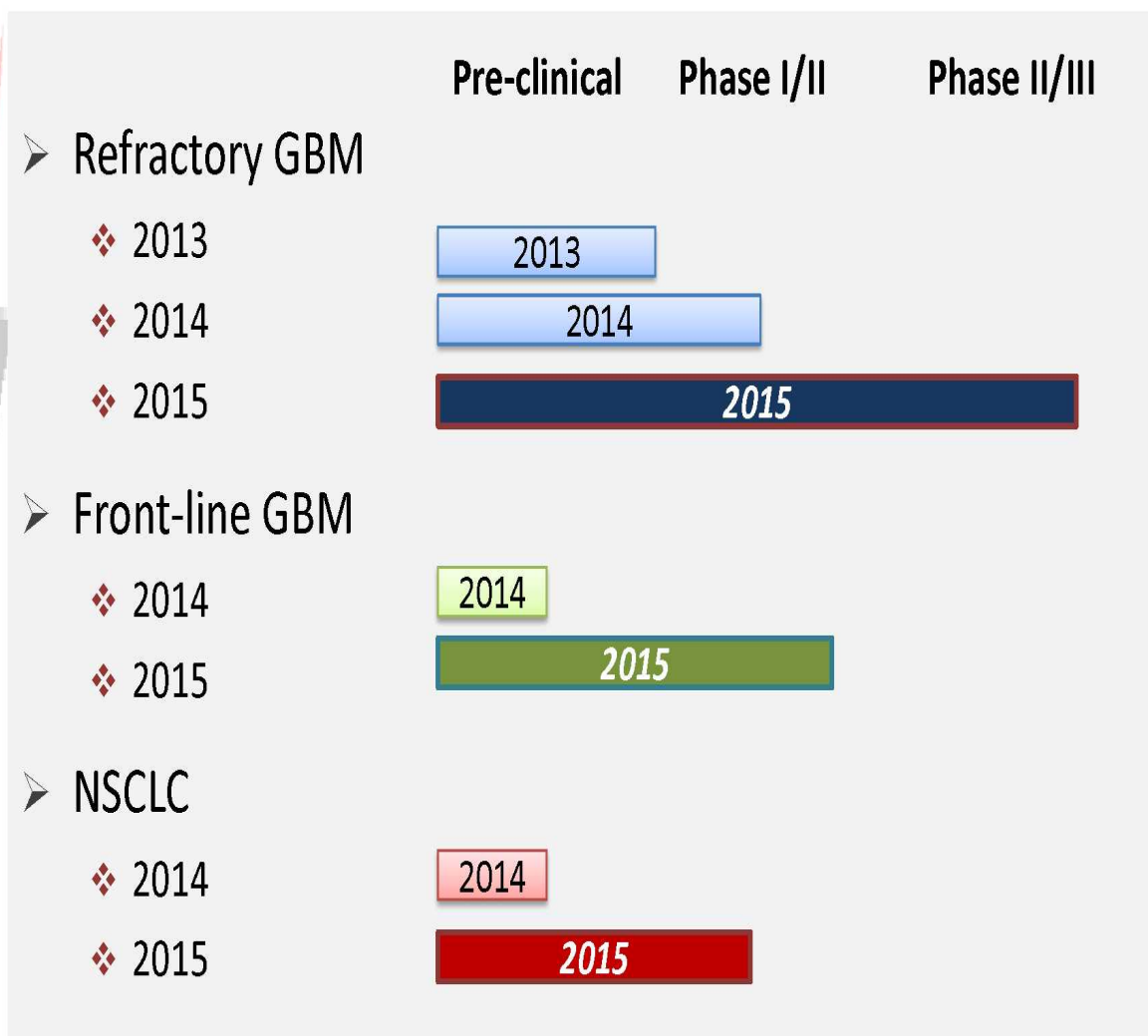
- ❖ Begin developing new clinical data to support sales growth
- ❖ Achieve royalty revenue through sales partnership
- ❖ Position VAL-083 for global development in lung cancer



DelMar clinical research in China will be supported by our manufacturing partner Guangxi Wuzhou Pharmaceuticals

Building Our Pipeline: VAL-083

2013 >> 2015



Recent Operational Highlights Build Strong Foundation for Growth and Execution

- ✓ Continued strategic efforts to fulfill the requirements to up-list common stock to a national exchange
- ✓ Appointed of Lynda Cranston, BScN, MScN, ICD.D, to Board as an independent director and Chair of the newly formed Governance and Compensation Committee
- ✓ Completed a Warrant Exchange Tender Offer and the exercise of Investor Warrants
- ✓ Received a notice of allowance for a third United States patent covering VAL-083
- ✓ Received approval for the up-listing of the Company's common stock from OTCQB to OTCQX, and began trading in December of 2014

DMPI Capitalization

PRO FORMA AT 31-DEC/2014 (UNAUDITED)

Shares Outstanding		CASH & Equivalents	~\$4.0 m
DMPI Shares	34.8 m		<i>Cash burn < \$1m/quarter</i>
ExchangeCo	<u>4.3 m</u>	Derivative Liability	<i>Share price</i> \$0.85 \$1.60
Total outstanding	39.1 m		1.2m 1.7m
Warrants*	13.8 m	Shareholders Equity	<u>\$2.8m</u> <u>\$2.3m</u>
Options	<u>3.4 m</u>		
Fully Diluted	<u>56.3 m</u>		

*4.3 million investor warrants can be called at \$0.80/share if stock is >\$1.60/share for 20 consecutive trading days

Near-Term Milestones Expected to Drive Value

- Complete the dose-escalation portion of the Phase I/II clinical trial in the first half of calendar 2015
- Advance VAL-083 into Phase II/III registration-directed clinical trials for GBM
- Present interim data at peer-reviewed scientific meetings
- Initiate clinical trials with VAL-083 in NSCLC
- Seek strategic opportunities to expand the Company's asset base
- Pursue a national exchange listing to maximize shareholder value
- Continue to build a robust intellectual property portfolio

Q&A Session with Management



DelMar

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