## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287
Estimated average	burden
hours per response:	. 0.5

to Section 16	6. Form 4 or Form 5 nay continue. See (b).		ed pursuant to Section 16(a) of the Securities Exchange Act of 193- or Section 30(h) of the Investment Company Act of 1940	4		Estimated ave hours per res	0	0.5
Petersen G (Last) C/O PLUS T	(First)	(Middle)	2. Issuer Name <b>and</b> Ticker or Trading Symbol PLUS THERAPEUTICS, INC. [ PSTV ] 3. Date of Earliest Transaction (Month/Day/Year) 08/13/2020	5. Relationship of Reporting Pers (Check all applicable) X Director Officer (give title below)			on(s) to Issuer 10% Owner Other (specify below)	
(Street) AUSTIN (City)	TX (State)	78756 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X	Form filed	t/Group Filing by One Repo by More than	rting Person	

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	if any '						5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(1130. 4)
Common Stock	08/13/2020		Р		10,000	Α	\$2.8	20,000	D	

	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## Explanation of Responses:

**Remarks:** 

## /s/ Andrew Sims, as attorney-08/14/2020 in-fact

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.