

**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
WASHINGTON, D.C. 20549**

**FORM 8-K/A**  
(Amendment No. 1)

**CURRENT REPORT**  
**Pursuant to Section 13 or 15(d)**  
**of the Securities Exchange Act of 1934**

**Date of Report (Date of earliest event reported): March 15, 2022**

**BETTER THERAPEUTICS, INC.**  
(Exact name of Registrant as Specified in Its Charter)

**Delaware**  
(State or other jurisdiction  
of incorporation)

**001-39864**  
(Commission  
File Number)

**85-3472546**  
(IRS Employer  
Identification No.)

**548 Market Street #49404**  
**San Francisco, California**  
(Address of principal executive offices)

**94104**  
(Zip Code)

**Registrant's Telephone Number, Including Area Code: (415) 887-2311**

**Not Applicable**  
(Former Name or 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:

- ☐ 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))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
<b>Common Stock</b>	<b>BTTX</b>	<b>Nasdaq Capital Market</b>

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company ☒

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

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**Introductory Note**

This Amendment No. 1 on Form 8-K/A (“Form 8-K/A”) amends the Current Report on Form 8-K of Better Therapeutics, Inc., a Delaware corporation (the “Company”), filed on March 15, 2022 (the “Original 8-K”). This Form 8-K/A is being filed solely to amend Exhibit 99.2 to the Original 8-K to correct an error in the chart depicted on the slide titled “Dose Response of nCBT.” No other changes have been made to the Original 8-K or the exhibits thereto.

**Item 8.01. Other Information.**

On March 15, 2022, the Company used a corporate presentation on primary endpoint data from its clinical trial of BT-001 for its investor call, and filed the presentation as Exhibit 99.2 to the Original 8-K. The corporate presentation included an error in the chart depicted on the slide titled “Dose Response of nCBT”. The corporate presentation with the corrected slide is filed as Exhibit 99.1 to this Form 8-K/A and is incorporated by reference herein.

**Item 9.01 Financial Statements and Exhibits.**

(d) Exhibits.

Exhibit Number	Description
99.1	<a href="#">Corporate Presentation of Better Therapeutics, Inc., dated March 15 2022</a>
104	Cover Page Interactive Data File (embedded within the Inline XBRL document)

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.

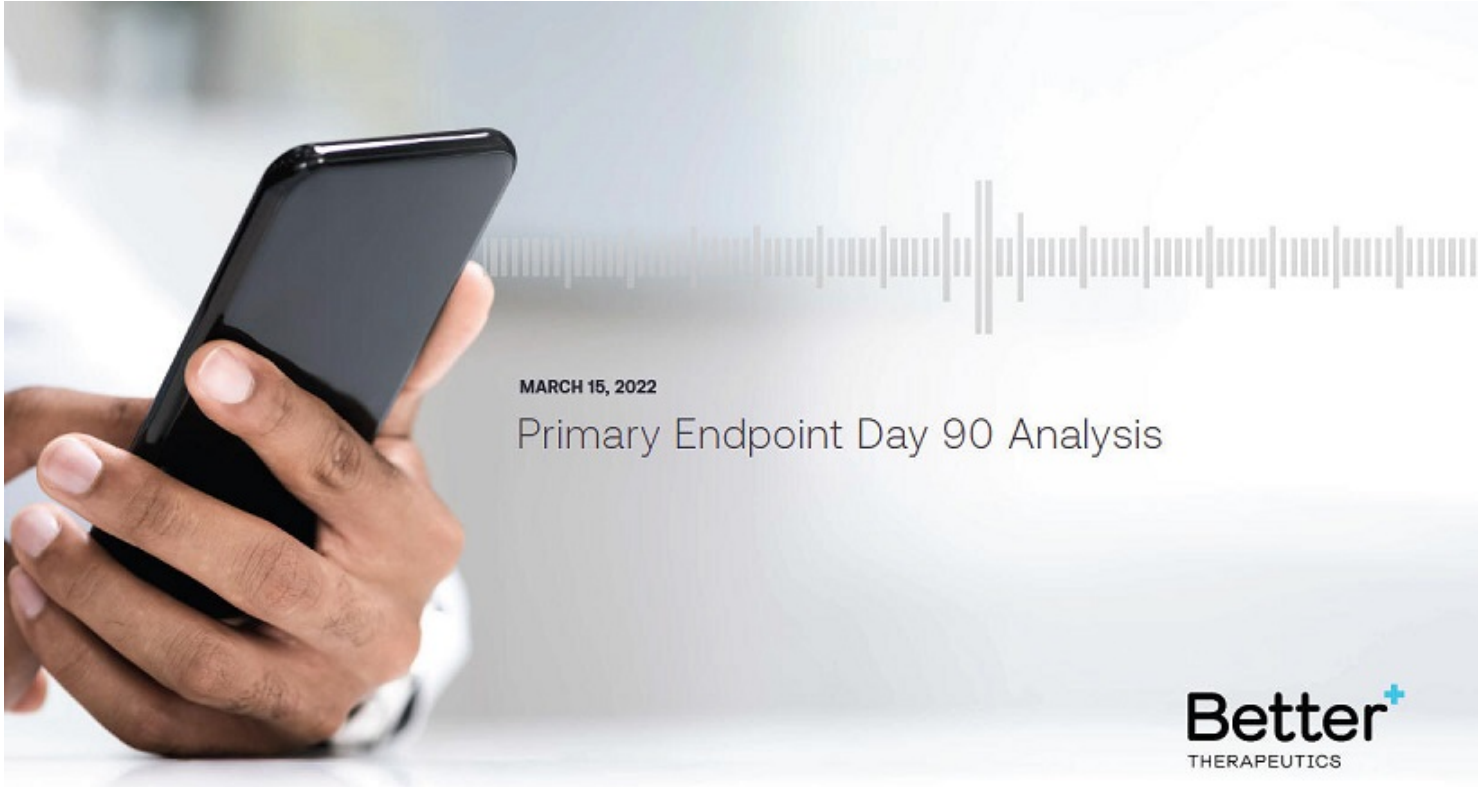
Better Therapeutics, Inc.

Dated: March 15, 2022

By: /s/ Mark Heinen

Name: Mark Heinen

Title: Chief Financial Officer



MARCH 15, 2022

## Primary Endpoint Day 90 Analysis

**Better<sup>+</sup>**  
THERAPEUTICS

#### Disclaimer

This presentation ("Presentation") is for informational purposes only. The information contained herein does not purport to be all-inclusive and neither Better Therapeutics, Inc. ("BetterTX" or the "Company") nor any of its respective affiliates nor any of its or their control persons, officers, directors, employees or representatives makes any representation or warranty, express or implied, as to the accuracy, completeness or reliability of the information contained in this Presentation. You should consult your own counsel and tax and financial advisors as to legal and related matters concerning the matters described herein, and, by accepting this Presentation, you confirm that you are not relying upon the information contained herein to make any decision. The reader shall not rely upon any statement, representation or warranty made by any other person, firm or corporation in making its investment or decision to invest in the Company. Neither the Company nor any of its respective affiliates nor any of its or their control persons, officers, directors, employees or representatives, shall be liable to the reader for any information set forth herein or any action taken or not taken by any reader, including any investment in shares of the Company.

Certain information contained in this Presentation relates to or is based on studies, publications, surveys and the Company's own internal estimates and research. In addition, all of the market data included in this Presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while the Company believes its internal research is reliable, such research has not been verified by any independent source. This meeting and any information communicated at this meeting are strictly confidential and should not be discussed outside your organization.

#### Forward-Looking Statements.

Certain statements in this Presentation may be considered forward-looking statements, within the meaning of the safe harbor provisions under the United States Private Securities Litigation Reform Act of 1995. Forward-looking statements are typically identified by words such as "plan," "believe," "expect," "anticipate," "intend," "outlook," "estimate," "forecast," "project," "continue," "could," "may," "might," "possible," "potential," "predict," "should," "would" and other similar words and expressions, but the absence of these words does not mean that a statement is not forward-looking. The forward-looking statements in this press release include, but are not limited to, statements regarding the timing and results of the ongoing trial of BT-001 in patients with type 2 diabetes, the Company's plans regarding FDA submissions expectations related to the potential benefits of BT-001 and CBT and their potential treatment applications, the Company's plans regarding the research and advancement of its product candidates for additional treatments, expectations related to the interest of healthcare providers and payers in PDTs and legislative developments affecting PDTs and the outcome of such developments, among others. These forward-looking statements are based on the current expectations of the management of the Company and are inherently subject to uncertainties and changes in circumstances and their potential effects and speak only as of the date of such statement. There can be no assurance that future developments will be those that have been anticipated. These forward-looking statements involve a number of risks, uncertainties or other assumptions that may cause actual results or performance to be materially different from those expressed or implied by these forward-looking statements including: risks related to the Company's business, such as the willingness of the FDA to authorize PDTs for commercial distribution and insurance companies to reimburse their use, market acceptance of PDTs, the risk that the results of previously conducted studies will not be repeated or observed in ongoing or future studies involving our product candidates and other risks and uncertainties included under the header "Risk Factors" in the definitive proxy statement/prospectus filed by us on October 12, 2021.



Better<sup>+</sup>  
THERAPEUTICS

## Baseline Characteristics

Diverse, nationally representative patient population recruited from 6 states

Parameter / Category	Statistic	Standard of Care (n=343)	BT-001 (n=326)	Overall (n=669)
Age (yrs)	Mean	57.5	57.6	57.5
% Female	%	56.3%	56.1%	56.2%
Race	%			
White		60.1%	59.5%	59.8%
Black or African American		28.3%	28.5%	28.4%
Asian		5.0%	4.0%	4.5%
American Indian or Alaskan Native		0.9%	1.2%	1.0%
Native Hawaiian or Other Pacific Islander		0.3%	0.3%	0.3%
Ethnicity - Hispanic or Latino	%	14.0%	17.5%	15.7%
Median Household Income	Median	\$61,330	\$64,228	\$62,723
% High school degree only, and some college but no degree	%	40.8%	37.7%	39.4%

## Baseline Characteristics

Participants had long-standing T2 diabetes, high cardiovascular risk, multiple comorbidities and extensive medication use

Parameter / Category	Statistic	Standard of Care (n=343)	BT-001 (n=326)	Overall (n=669)
BMI (kg/m <sup>2</sup> )	Mean	35.0	35.0	35.0
Baseline HbA1c (%)	Mean	8.1%	8.2%	8.1%
Years Since Diagnosis	Mean	10.9	11.0	11.0
% on 2 or More Antihyperglycemic Medications	%	69.9%	69.0%	69.3%
Using Antihypertensive Medications	%	71.1%	67.5%	69.4%
% on 2 or More Number of Antihypertensive Medications <sup>(1)</sup>	%	66.5%	69.0%	67.7%
10 Year CV Risk Score	Mean	15.1%	15.1%	15.1%
Number of Comorbidities	Mean	2.7	2.8	2.7

<sup>(1)</sup> For those treated for hypertension (67.5% of participants)



## Change in A1c (-0.4%) was Clinically Meaningful and Highly Statistically Significant

	Statistic	Standard of Care (n=307)	BT-001 (n=295)	Difference	P-value
Baseline	Mean (SD)	8.1% (0.9)	8.2% (0.9)		
Day 90	Mean (SD)	8.2% (1.4)	7.9% (1.3)		
Day 90, Change From Baseline					
- Intent to Treat Population	Mean (SD)	0.1% (1.2)	-0.3% (1.1)	0.4%	<0.001
- Per Protocol Population	Mean (SD)	0.1% (1.1)	-0.3% (.9)	0.4%	<0.001
Decreased by 0.4% or more	% of Group	25.4%	42.7%	17.3%	<0.001

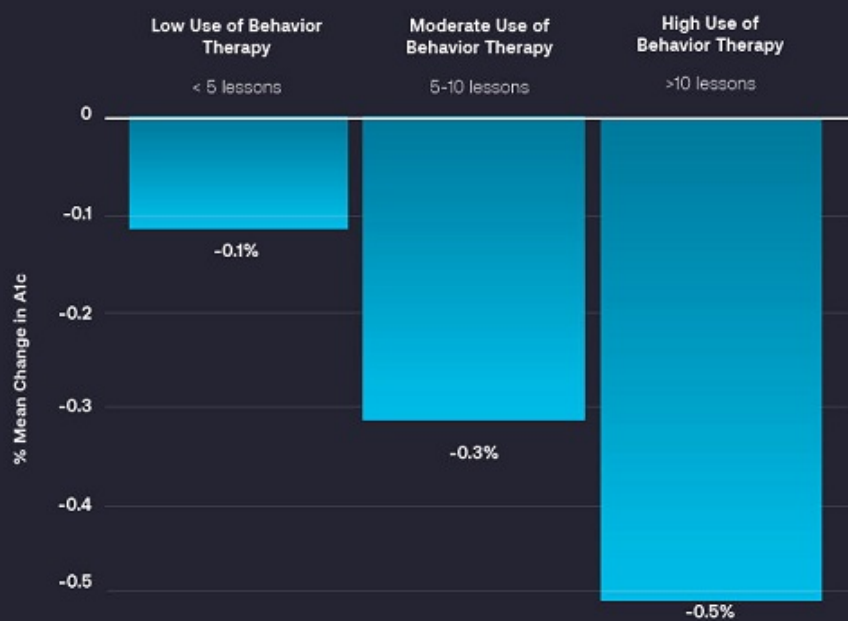
## Safety Data Summary

Study demonstrates expected profile in T2DM population. No meaningful differences between groups. No events related to BT-001 device.

Number of Subjects who Experienced:	Standard of Care (n=343)		BT-001 (n=326)		Overall (n=669)	
	Subjects n (%)	Events n	Subjects n (%)	Events n	Subjects n (%)	Events n
A TEAE (Treatment-Emergent Adverse Event)	76 (22.2%)	113	68 (20.9%)	111	144 (21.5%)	224
A Serious TEAE	10 (2.9%)	10	4 (1.2%)	4	14 (2.1%)	14
A TEAE Possibly/Probably Related to Study Intervention	0 (0.0%)	0	0 (0.0%)	0	0 (0.0%)	0
A TEAE that is Related to Medical Software	0 (0.0%)	0	0 (0.0%)	0	0 (0.0%)	0

## Dose Response of nCBT

Higher dose associated with larger improvements as compared with SOC, without increased adverse events



## Patient Engagement

Pilot

4.9



68%

7.5



64%

59

Pivotal

5.7



64%

7.5



89%

45

Minutes / Day

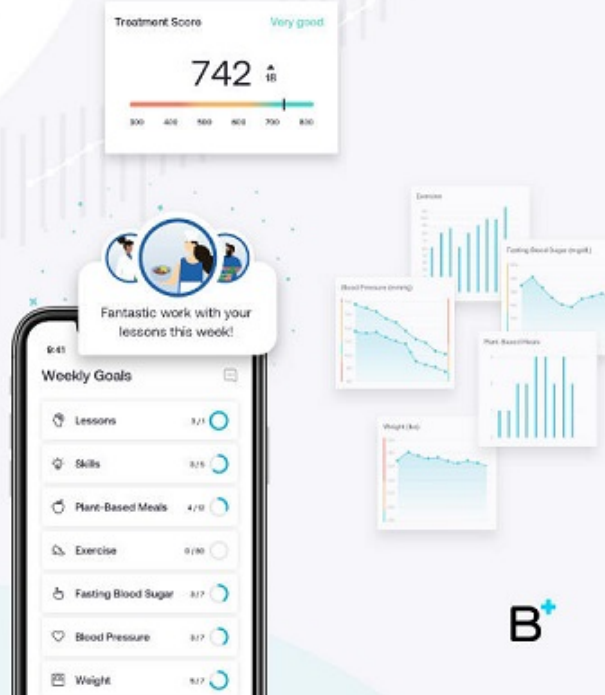
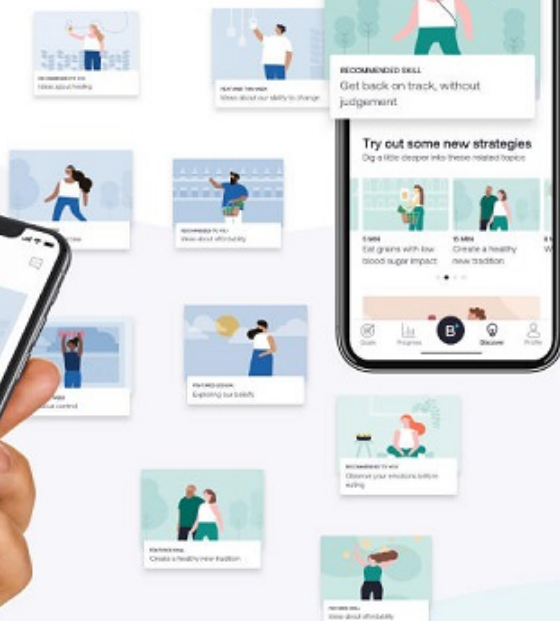
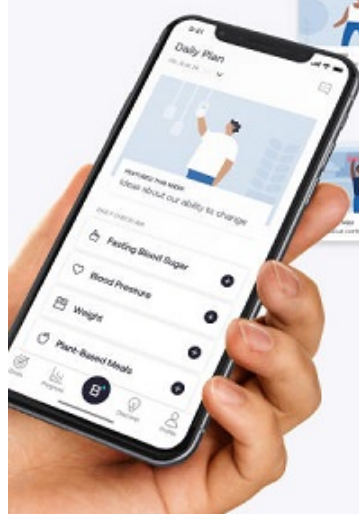
Percent of Patients  
Using BT-001 as  
Intended

Average Lessons  
Completed

Percent of Patients Using  
the App at Week 10

Net Promoter  
Score

Better<sup>+</sup>



B<sup>+</sup>