## Edgar Filing: MARINO JAMES J - Form 4

MARINO J. Form 4	AMES J											
July 30, 201	8											
FORM		CT A TEC	CECU						NT	PPROVAL		
	Washington, D.C. 20549						N OMB Number:	3235-0287				
Check this box if no longer STATEMENT OF CHANCES IN I				RENEE	юлл	OW	NEBSHID OI	Expires:	January 31, 2005			
subject to STATEMENTO Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated burden ho	Estimated average burden hours per response 0.5		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							. 0.0					
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> MARINO JAMES J			2. Issuer Name <b>and</b> Ticker or Trading Symbol Onconova Therapeutics, Inc. [ONTX]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O ONCONOVA			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director10% Owner Officer (give titleOther (specify below) below)				
	UTICS, 375 PHE	ASANT	07/26/2	2018								
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEWTOW	N, PA 18940								More than One R			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securit	ties Acq	uired, Disposed	of, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)		Month/Day/Year) 2A. Deem Month/Day/Year) Execution any (Month/Day		Date, if TransactionAcquired (A) Code Disposed of (I			S B C F R T	Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount		Price <sup>(1</sup>	Instr. 3 and 4)				
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities benef	ficially ow	ned dire	ctly or i	indirectly.				

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Sha
Stock Option (right to purchase)	\$ 0.46	07/26/2018		А	87,500	07/26/2019(1)	07/26/2028	Common Stock	87,50

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
MARINO JAMES J C/O ONCONOVA THERAPEUTICS 375 PHEASANT RUN NEWTOWN, PA 18940	х			
Signatures				
/s/ Mark Guerin as attorney-in-fact	07/30/20	18		
**Signature of Reporting Person	Date			
Evaluation of Deene				

## **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) These options vest 100% on the first anniversary of the grant date.

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.