## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C.	20549
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l	OMB APPRO	VAL						
	OMB Number:	3235-0287						
	Estimated average burden							
	hours per response:	0.5						

Check this box if no longer subject to Section 16. 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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person $^*$ <u>Hoffman Michael B</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol Onconova Therapeutics, Inc. [ ONTX ]						Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner							
(Last) 712 FIFT	(Fii H AVENU	rst) (E, 36TH FLOO	(Middle) R		3. Date of Earliest Transaction (Month/Day/Year) 02/20/2014							Officer (give title Other (specify below) below)					
(Street) NEW YC	ORK N	Y :	10019		4. If	f Amendr	nent, Date	of Origi	inal Fil	ed (Month/Da	y/Year)		For	or Joint/G m filed by m filed by son	One Re	eporting P	erson
(City)	(St		(Zip)	lan Daning	4:					:	f D		i a II				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y		n 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)		I (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership						
						(	Code	v	Amount	(A) or (D)	Price	Reporte Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock			02/20/20:	14			P		71,740	A	\$8.03	4,44	6,535		I	By the Michael and Jane Hoffman 2013 Descendants Trust <sup>(3)</sup>
Common	Stock			02/21/20	14			P		71,740	A	\$8.91	<sup>(2)</sup> 4,51	8,275		I	By the Michael and Jane Hoffman 2013 Descendants Trust <sup>(3)</sup>
Common Stock										84,	530		I	By the Michael and Jane Hoffman 2013 Descendants Trust(non- GST Exempt Trust) <sup>(3)</sup>			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
		ransa Code (	5. Number of Derivative		1		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)				
	of Posnons			c	Code	v	(D)	Date Exerc	isable	Expiration Date		or Number of Shares					

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased, pursuant to a 10b5-1 plan, in multiple transactions at prices ranging from \$7.76 to \$8.72, inclusive. The reporting person undertakes to provide to the Company, any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote (1) to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased, pursuant to a 10b5-1 plan, in multiple transactions at prices ranging from \$8.56 to \$9.16, inclusive. The reporting person undertakes to provide to the Company, any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. These shares are held in trust for the benefit of the reporting person's descendants. The reporting person's spouse is a trustee of the trust.

/s/ By Ajay Bansal as attorney-02/21/2014 in-fact

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

- $^{\star}$  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.