FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washin

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gton, D.C. 20549	OMB APPROVAL

STATEMENT	<b>OF CHANGES</b>	<b>IN BENEFICIAL</b>	<b>OWNERSHIP</b>
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*  MARINO JAMES J						2. Issuer Name and Ticker or Trading Symbol Onconova Therapeutics, Inc. [ ONTX ]									all applicable) Director		g Person(s) to Issuer 10% Owner			
	CONOVA T	THERAPEUTIC	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/26/2017										Office below	er (give title v)		Other (specify below)		
375 PHEASANT RUN  (Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
NEWTO			.8940 Zip)													Form Pers	n filed by Mo on	re than On	e Rep	orting
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or 3, 4 ar	4 and Se		Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(	A) or D)	or Price		Transa	ction(s) 3 and 4)			(	
Common Stock 04/26				6/2017				P		11,90	6 A		\$2	2.1		6,321	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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			Deriv Secu	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nun of Sha							

**Explanation of Responses:** 

/s/ Mark Guerin as attorney-in-04/28/2017

\*\* 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.