Edgar Filing: Onconova Therapeutics, Inc. - Form 4

Onconova Thera	peutics, Inc.										
Form 4 June 17, 2015											
<i>,</i>	1									PPROVAL	
Washi					RITIES AND EXCHANGE COMMISSION shington, D.C. 20549					3235-0287	7
Check this bo if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instructio 1(b).	NGES IN SECUF 16(a) of th Jtility Hol	GES IN BENEFICIAL OWNERSHIP OF SECURITIES 6(a) of the Securities Exchange Act of 1934, tility Holding Company Act of 1935 or Section vestment Company Act of 1940					January 31 pires: 2005 imated average den hours per ponse 0.5				
(Print or Type Respo	onses)										
1. Name and Address of Reporting Person <u>*</u> Bienen Henry S			2. Issuer Name and Ticker or Trading Symbol Onconova Therapeutics, Inc. [ONTX]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O ONCONOVA THERAPEUTICS, INC., 375 PHEASANT RUN			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2015			X_ Director 10% Owner Officer (give title Other (specify below) below)					
				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				
NEWTOWN, P	A 18940							Form filed by Person	More than One F	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	ully Owned	
	ransaction Date nth/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 2 (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect	
Reminder: Report o	on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned di	rectly o	or 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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)			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 of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to purchase)	\$ 2.69	06/15/2015		A	10,000	<u>(1)</u>	06/15/2025	Common Stock	10,000

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Reporting Owners

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Bienen Henry S C/O ONCONOVA THERAPEUTICS, 375 PHEASANT RUN NEWTOWN, PA 18940	INC.	Х					
Signatures							
/s/ Ajay Bansal as attorney-in-fact	06/16	/2015					
**Signature of Reporting Person	Dat	e					

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 over one year in 12 equal monthly installments.

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.