## Edgar Filing: Onconova Therapeutics, Inc. - Form 4

Onconova Therapeutics, Inc. Form 4 September 01, 2016 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Kumar Ramesh Issuer Symbol Onconova Therapeutics, Inc. (Check all applicable) [ONTX] (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_\_ Director 10% Owner X\_Officer (give title Other (specify (Month/Day/Year) below) below) C/O ONCONOVA 09/01/2016 President and CEO THERAPEUTICS, INC., 375 PHEASANT RUN (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting NEWTOWN, PA 18940 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 1.Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of TransactionAcquired (A) or Form: Direct Indirect Security (Month/Day/Year) Execution Date, if Securities (Instr. 3) Code Disposed of (D) Beneficially (D) or Indirect Beneficial anv (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned (I) Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                                     | Derivative Conversion (Month/Day/Year<br>Security or Exercise |            | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4. 5. Number of<br>TransactiorDerivative<br>Code Securities<br>(Instr. 8) Acquired (A)<br>or Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|---|---|------------|---|--|---------|--|--------------------|---|-------------------------------------|
|   |   |            |   | Code V   | (A) (D) | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Stock<br>Option<br>(right to<br>purchase)   | \$ 3.24   | 09/01/2016 |   | A  | 44,000  | (1)  | 09/01/2026         | Common<br>Stock   | 44,000                              |
| Reporting Owners  |   |            |   |  |         |  |                    |   |                                     |
| Reporting Owner Name / Address  |   |            |   | Relationships  |         |  |                    |   |                                     |
|   |   |            | Director  | 10% Owner  | Officer |  | Other              |   |                                     |
| Kumar Ramesh<br>C/O ONCONOVA THERAPEUTICS, INC<br>375 PHEASANT RUN<br>NEWTOWN, PA 18940 |   | NC. X      |   | President and CEO  |         |  |                    |   |                                     |
| Signat  | ures  |            |   |  |         |  |                    |   |                                     |
| /s/ Mark C  | Guerin as   |            |   |  |         |  |                    |   |                                     |

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\*\*Signature of Reporting Person

attorney-in-fact

09/01/2016 Date

## **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 three years in 36 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.