FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
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

Name and Address of Reporting Person* Wills Robert James					2. Issuer Name and Ticker or Trading Symbol Oncternal Therapeutics, Inc. [ONCT]								ck all app	,	ng Perso	on(s) to Is 10% Ov				
(Last)	(Fi	rst) (ľ	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/23/2024								Office below	er (give title		Other (s below)	specify		
12230 EL CAMINO REAL, SUITE 230					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)														X	X Form filed by One Reporting Person					
SAN DII	EGO CA	A 9	2130											Form filed by More than One Reporting Person						
(City)	(St	rate) (2	Zip)		Rul	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst														
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	Bene	ficiall	y Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Date,		Date,	Transaction Disposed Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 an		A) or , 4 and	5. Amo Securit Benefic Owned Report	ties cially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)		rice	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			02/23/2	2024				S		980(1)	D	\$	9.04 ⁽¹⁾)4 ⁽¹⁾ 0		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)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise (Month/Day/Year) Execution Date, (fany (Month/Day/Year) Transactic Code (Institute) Execution Date, (fany (Month/Day/Year) Execut			of Deriv	r osed) r. 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O Fo O (I)	0. Iwnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V (A) (D)		Date Exercis	sable	Expiration Date	Title	Amo or Num of Shar	ber								

Explanation of Responses:

1. The shares of common stock were sold directly to another director of the Issuer, David F. Hale, and an affiliated entity of Mr. Hale in a private sale. The price per share was based on the closing price of the Issuer's common stock on February 23, 2024.

Remarks:

The number of shares of common stock in this form have been adjusted to reflect the Issuer's 1-for-20 reverse stock split effective as of January 8, 2024.

/s/Chase C. Leavitt, Attorney-02/27/2024 in-fact

** 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.