The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL OMB 3235-Number: 0076 Estimated average burden hours per 4.00 response:

1. Issuer's Identity

CIK (Filer ID Numb	per) Previous Names	None	Entity Type
0001260990	GTX INC /I	DE/	X Corporation
Name of Issuer			Limited Partnership
Oncternal Therapeutics, Inc.			Limited Liability Company
Jurisdiction of			General Partnership
Incorporation/Organiz	zation		Business Trust
DELAWARE			Other (Specify)
Year of Incorporation	on/Organization		(-F · ··· · <i>f</i>)
X Over Five Years Ago			
Within Last Five Years (Sp	ecify Year)		
Yet to Be Formed			
2. Principal Place of Business a	and Contact Information		
Name of	Issuer		
Oncternal Therapeutics, Inc.			
Street Ad	dress 1	Stree	et Address 2
12230 El Camino Real		Suite 300	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
San Diego C	CALIFORNIA	92130	(858) 434-1113
3. Related Persons			
Last Name	Firs	t Name	Middle Name
Breitmeyer, M.D., Ph.D.	James	B.	
Street Address 1	Street	Address 2	
c/o Oncternal Therapeutics, In	c. 12230 El Camino	Real, Suite 300	
City	State/Prov	vince/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130)
Relationship: X Executive Of	fficer X Director Promo	ter	
Clarification of Response (if N	ecessary):		
President and Chief Executive	Officer		
Last Name	Firs	t Name	Middle Name
Vincent	Richard		
Street Address 1	Street	Address 2	
c/o Oncternal Therapeutics, In	c. 12230 El Camino	Real, Suite 300	
City	State/Prov	vince/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130)
Relationship: X Executive Of	fficer Director Promot	er	

Clarification of Response (if Necessary):

Chief Financial Officer

Last Name	First Name		Middle Name
Bilinsky, Ph.D. Street Address 1	Igor Street Address 2		
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300		
City	State/Province/Country		ZIP/PostalCode
San Diego	CALIFORNIA	92130	
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necessa	ary):		
Chief Business Officer			
Last Name	First Name		Middle Name
Hsu, M.D.	Frank		
Street Address 1	Street Address 2		
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300		
City San Diego	State/Province/Country CALIFORNIA	92130	ZIP/PostalCode
Relationship: X Executive Officer	Director Promoter	12130	
-			
Clarification of Response (if Necess	a1 y j.		
Chief Medical Officer			
Last Name	First Name		Middle Name
Kaufmann	Gunnar	F.	
Street Address 1	Street Address 2		
c/o Oncternal Therapeutics, Inc. City	12230 El Camino Real, Suite 300 State/Province/Country		ZIP/PostalCode
San Diego	CALIFORNIA	92130	
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necessa	ary):		
Chief Scientific Officer			
Last Name	First Name		Middle Name
Hale	David	F.	
Street Address 1	Street Address 2		
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300		
City	State/Province/Country	_	ZIP/PostalCode
San Diego	CALIFORNIA	92130	
	X Director Promoter		
Clarification of Response (if Necessa	ary):		
Last Name	First Name		Middle Name
Carter, M.D., ChB, FRCP	Michael	G.	
Street Address 1	Street Address 2		
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300		
City	State/Province/Country	02120	ZIP/PostalCode
San Diego	CALIFORNIA	92130	
Relationship: Executive Officer 2	X Director Promoter		

Clarification of Response (if Necessary):

Last Name Kisner, M.D.	First Name Daniel	Middle Name
Street Address 1	Street Address 2	
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300	
City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
LaRue	William	R.
Street Address 1	Street Address 2	
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300	
City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Nakanishi, Ph.D.	Xin	
Street Address 1	Street Address 2	
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300	
City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
C C	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Theuer	Charles	
Street Address 1	Street Address 2	
c/o Oncternal Therapeutics, Inc.	12230 El Camino Real, Suite 300	
City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Wills, Ph.D.	Robert	
Street Address 1	Street Address 2	
	Street Address 2 12230 El Camino Real, Suite 300	
		ZIP/PostalCode
c/o Oncternal Therapeutics, Inc. City	12230 El Camino Real, Suite 300	ZIP/PostalCode 92130
c/o Oncternal Therapeutics, Inc. City San Diego	12230 El Camino Real, Suite 300 State/Province/Country	
c/o Oncternal Therapeutics, Inc. City San Diego Relationship: Executive Officer 2	12230 El Camino Real, Suite 300 State/Province/Country CALIFORNIA X Director Promoter	
c/o Oncternal Therapeutics, Inc. City San Diego Relationship: Executive Officer 2	12230 El Camino Real, Suite 300 State/Province/Country CALIFORNIA X Director Promoter	
c/o Oncternal Therapeutics, Inc. City San Diego Relationship: Executive Officer 2 Clarification of Response (if Necess	12230 El Camino Real, Suite 300 State/Province/Country CALIFORNIA X Director Promoter ary):	92130
c/o Oncternal Therapeutics, Inc. City San Diego Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name	12230 El Camino Real, Suite 300 State/Province/Country CALIFORNIA X Director Promoter ary): First Name	92130
c/o Oncternal Therapeutics, Inc. City San Diego Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Cho	12230 El Camino Real, Suite 300 State/Province/Country CALIFORNIA X Director Promoter ary): First Name Man	92130

San DiegoCALIFORNIARelationship:Executive Officer X DirectorPromoter

92130

Clarification of Response (if Necessary):

4. Industry Group

Agriculture		Health Care	Retailing
Banking & Financial	Services	X Biotechnology	Restaurants
Commercial Bank	ing	Health Insurance	Technology
Insurance		Hospitals & Physicians	Computers
Investing Investment Bankir	ıg	Pharmaceuticals	Telecommunications
Pooled Investment	Fund	Other Health Care	Other Technology
Is the issuer registe		Manufacturing	Travel
an investment com the Investment Co		Real Estate	Airlines & Airports
Act of 1940?	mpany	Commercial	Lodging & Conventions
Yes	No	Construction	Tourism & Travel Services
Other Banking & I	Financial Services	REITS & Finance	Other Travel
Business Services		Residential	Other
Energy		Other Real Estate	
Coal Mining			
Electric Utilities			
Energy Conservati	on		
Environmental Ser	vices		

Oil & Gas

Other Energy

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Compan	y Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)
Rule 504 (b)(1)(i)	Section $3(c)(2)$	Section 3(c)(10)
Rule 504 (b)(1)(ii)	Section $3(c)(3)$	Section 3(c)(11)
Rule 504 (b)(1)(iii) X Rule 506(b)	Section $3(c)(4)$	Section 3(c)(12)
Rule 506(c)	Section $3(c)(5)$	Section 3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)
	Section 3(c)(7)	

7. Type of Filing		
X New Notice Date of First Sale 2020-12-14 First Sa Amendment	le Yet to Occur	
8. Duration of Offering		
Does the Issuer intend this offering to last more than one	year? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
Equity Debt X Option, Warrant or Other Right to Acquire Another Se X Security to be Acquired Upon Exercise of Option, War Other Right to Acquire Security		ts
10. Business Combination Transaction		
Is this offering being made in connection with a business as a merger, acquisition or exchange offer?	combination transaction, such Yes X	No
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor	s \$0 USD	
12. Sales Compensation		
Recipient	Recipient CRD Number None	
H.C. Wainwright & Co., LLC	375	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number	X None
None	Number None	X None
None Street Address 1	Number	X None
None	Number None	ZIP/Postal
None Street Address 1 430 Park Avenue City	Number None Street Address 2 State/Province/Country	ZIP/Postal Code
None Street Address 1 430 Park Avenue	Number None Street Address 2	ZIP/Postal
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X States	Number None Street Address 2 State/Province/Country NEW YORK	ZIP/Postal Code
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US	ZIP/Postal Code
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States Recipient	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None	ZIP/Postal Code
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States Recipient Rodman & Renshaw, LLC (Associated) Broker or Dealer X None None	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None 281264 (Associated) Broker or Dealer CRD Number None	ZIP/Postal Code 10022
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States Recipient Rodman & Renshaw, LLC (Associated) Broker or Dealer X None None Street Address 1	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None 281264 (Associated) Broker or Dealer CRD Number	ZIP/Postal Code 10022
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States Recipient Rodman & Renshaw, LLC (Associated) Broker or Dealer X None None Street Address 1 430 Park Avenue	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None 281264 (Associated) Broker or Dealer CRD Number None Street Address 2	ZIP/Postal Code 10022 X None
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All Check "All States" or check individual X States States Recipient Rodman & Renshaw, LLC (Associated) Broker or Dealer X None None Street Address 1 430 Park Avenue City	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None 281264 (Associated) Broker or Dealer CRD Number None Street Address 2 State/Province/Country	ZIP/Postal Code 10022 X None ZIP/Postal Code
None Street Address 1 430 Park Avenue City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual X All States Recipient Rodman & Renshaw, LLC (Associated) Broker or Dealer X None None Street Address 1 430 Park Avenue	Number None Street Address 2 State/Province/Country NEW YORK Foreign/non-US Recipient CRD Number None 281264 (Associated) Broker or Dealer CRD Number None Street Address 2	ZIP/Postal Code 10022 X None ZIP/Postal

13. Offering and Sales Amounts

Total Offering Amount\$6,467,063 USD orIndefiniteTotal Amount Sold\$6,467,063 USDTotal Remaining to be Sold\$0 USD orIndefinite

Clarification of Response (if Necessary):

Represents warrants issued to H.C. Wainwright Co., LLC and Rodman & Renshaw, LLC to purchase up to 1,149,700 common shares at \$5.625 per share, in connection with underwriter compensation related to underwritten offering.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Oncternal Therapeutics,	/s/ James B. Breitmeyer,	James B. Breitmeyer,	President and Chief Executive	2020-12-
Inc.	M.D.	M.D.	Officer	21

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.