FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB AF | PPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| | | | | | | | | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* STEINER MITCHELL SHUSTER | | | | | 2. Issuer Name and Ticker or Trading Symbol GTX INC /DE/ [GTXI] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | | | | |
|---|--|------|--|---|---|---|---|------|--|--------|---------------------|---|-------|---|---|--|---|-----------------|---------------------|
| (Last) (First) (Middle) 175 TOYOTA PLAZA 7TH FLOOR | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/29/2013 | | | | | | | | | X Office belo | er (give title | | Other below) | specify |
| (Street) MEMPH (City) | IS TI | | 38103 Zip) | | 4. II | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Nor | ı-Deriv | ative | Se | curitie | s Ac | quired, | Disp | osed o | f, or | Bene | ficial | y Own | ed | | | |
| Da | | Date | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | | | | | | | 6. Owner: Form: Dir (D) or Ind (I) (Instr. | ect irect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | | A) or D) | Price | Trans | action(s) 3 and 4) | | | (111501.4) | |
| Common | Stock | | | | | | | | | | | | | | 3 | ,106(1) | I | | By 2010 Trust |
| Common | Stock | | | | | | | | | | | | | | 2,2 | 61,026 ⁽²⁾ | D | | |
| Common | Stock | | | | | | | | | | | | | | 1,8 | 867,951 | I | | By Wife |
| Common | Stock | | | | | | | | | | | | | | | 5,100 | I | | By Joint Account |
| Common Stock | | | | | | | | | | | | | | 1 | 134,721 | | | By Trust | |
| Common Stock | | | | | | | | | | | | | | | 1 | 133,981 | | I | |
| Common Stock | | | | | | | | | | | | | 1 | 133,741 | | I | | | |
| Common Stock | | | | | | | | | | | | | | 1 | 33,741 | I | | By Trust | |
| | | Та | ble II - D) | | | | | | | | sed of, onvertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | ivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | • | Amount of Securities Underlying Derivative Security (Instr. and 4) | | unt | Price of erivative derivative security seturity Securities Beneficially Owned Following Reported Transaction (Instr. 4) | | Owner Form Direct or Inc (I) (In: | t (D) lirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. Excludes annuity distribution of 131,104 shares from the 2010 Annuity Trust to the reporting person on January 29, 2013 and represents a change in beneficial ownership.
- 2. Includes annuity distribution of 131,104 shares from the 2010 Annuity Trust to the reporting person on January 29, 2013 and represents a change in beneficial ownership.

Remarks:

/s/ Henry P. Doggrell, by Power of Attorney

02/04/2013

** 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.