FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number: 3235-0287									
l	Estimated average burden									
I	hours per response:	0.5								

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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Name and Address of Reporting Person* Yazji Salim				2. Issuer Name and Ticker or Trading Symbol Oncternal Therapeutics, Inc. [ONCT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
					Shotelian Therapeaties, me. [offer]								Directo	r		10% Ow	ner		
(Loot)	/5	irot\	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							7	Officer below)	(give title		Other (s below)	pecify		
					02/	02/14/2024								C	hief Med	lical	Officer		
12230 E	L CAMINO	REAL, SUITE	230																
					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line	'					
SAN DI	EGO C.	٨	92130											Form fi	led by One	Repo	orting Persor	י ן	
SAN DI	EGO C.	A	92130		,									Form fi Person		e thar	one Repor	ting	
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication														
					1_	01	I. Abi . b	A									ak ta taka a da d	.	
					Ш				icate that a trai defense condi						n or written j	pian tn	at is intended	to	
		Tab	le I - Nor	-Deriv	ative	Sec	curities	Ac	quired, D	isposed c	f, or E	Bene	ficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				A. Deeme Execution f any Month/Da	Date,	, Transaction Disposed Code (Instr. 5)		rities Acquired (A) ad Of (D) (Instr. 3, 4		A) or 3, 4 and	Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									<u> </u>	1	(A) or				Reported Transaction(s)		[(Instr. 4)	
								Code V	Amount	(D	5	Price	(Instr. 3 a	and 4)					
		-							uired, Dis , options	•			•	Owned			·		
1. Title of Derivative Security (Instr. 3)	ve Conversion or Exercise Price of Derivative Security Conversion of Exercise (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Derivative Security Acquir (A) or Disposo of (D) (Derivati Securiti Acquire	ve es d ed	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and A of Securities Underlying Derivative Securities (Instr. 3 and A			curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	OI N Of	umber						

Explanation of Responses:

\$9.18

1. 25% of the shares subject to the stock option vest on first anniversary of the date of grant, and the remaining shares subject to the option vest in 36 equal monthly installments, subject to the recipient's continued employment or service with the Issuer on each such date

Remarks:

Stock

Option

/s/Chase C. Leavitt, Attorneyin-fact

14,200

\$0.00

02/15/2024

14,200

** Signature of Reporting Person

02/14/2034

Common

Stock

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).

02/14/2024

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(A)

14,200

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.