FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
asimigton,	D.C.	20040	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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* Nakanishi Xin			On	Issuer Name and Ticker or Trading Symbol Oncternal Therapeutics, Inc. [ONCT] Date of Earliest Transaction (Month/Day/Year)							(Che	eck all appli Directo	cable)	g Pers	son(s) to Iss 10% Ow Other (s	ner			
(Last)	(F	irst)	(Middle)			06/28/2023							below)			below)	pecily		
12230 EL CAMINO REAL, SUITE 230				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)																•	•	orting Perso	- 1
SAN DII	EGO C	A	92130												Form f Persor		thar	n One Repor	ting
(City)	(5	itate)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication								,					
l						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								d to					
		Tab	le I - Nor	า-Deriv	ative	Sec	curities	s Ac	quired, D	isp	osed c	of, or B	ene	ficiall	y Owned	k			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4			Benefici	es Fori ially (D) (Following (I) (I		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A) or (D)		Price	Transac	saction(s) r. 3 and 4)			Instr. 4)		
	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 3. Transaction Date Execution Date, (Month/Day/Year) if any (Month/Day/Year)		Date,		ansaction of ode (Instr. Derivative		ve es ed	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration ite	Title	or Nu of	nount imber ares					
Stock Options	\$0.3553	06/28/2023			A		25,000		(1)	06,	/28/2033	Commor Stock	25	5,000	\$0.00	25,000		D	

Explanation of Responses:

1. One-twelfth of the number of shares subject to the option vest and become exercisable in substantially equal installments on each monthly anniversary of the grant date, subject to the Reporting Person's continued service through such vesting date

Remarks:

/s/Chase C. Leavitt, Attorneyin-fact

06/30/2023

** 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.