

Onconova Therapeutics, Inc.

Form 3

July 24, 2013

FORM 3**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

OMB
Number: 3235-0104Expires: January 31,
2005Estimated average
burden hours per
response... 0.5**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF
SECURITIES**Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting
Person *

Altland James

(Last)

(First)

(Middle)

2. Date of Event Requiring
Statement

(Month/Day/Year)

07/24/2013

3. Issuer Name **and** Ticker or Trading Symbol
Onconova Therapeutics, Inc. [ONTX]4. Relationship of Reporting
Person(s) to Issuer5. If Amendment, Date Original
Filed(Month/Day/Year)

(Check all applicable)

☐ Director ☐ 10% Owner☒ Officer ☐ Other

(give title below) (specify below)

SVP, Finance & Corp. Develop.

6. Individual or Joint/Group

Filing(Check Applicable Line)

☒ Form filed by One Reporting
Person☐ Form filed by More than One
Reporting PersonC/O ONCONOVA
THERAPEUTICS, INC., 375
PHEASANT RUN

(Street)

NEWTOWN, PA 18940

(City)

(State)

(Zip)

Table I - Non-Derivative Securities Beneficially Owned1. Title of Security
(Instr. 4)2. Amount of Securities
Beneficially Owned
(Instr. 4)3. Ownership
Form:
Direct (D)
or Indirect
(I)
(Instr. 5)4. Nature of Indirect Beneficial
Ownership
(Instr. 5)Reminder: Report on a separate line for each class of securities beneficially
owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.****Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**1. Title of Derivative Security
(Instr. 4)2. Date Exercisable and
Expiration Date
(Month/Day/Year)Date
ExercisableExpiration
Date3. Title and Amount of
Securities Underlying
Derivative Security
(Instr. 4)

Title

Amount or
Number of4. Conversion
or Exercise
Price of
Derivative
Security5. Ownership
Form of
Derivative
Security:
Direct (D)6. Nature of Indirect
Beneficial
Ownership
(Instr. 5)

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				Shares		or Indirect (I) (Instr. 5)	
Stock Option (right to purchase)	07/31/2011	08/01/2017	Common Stock	60,015	\$ 6	D	Â
Stock Option (right to purchase)	03/17/2010	03/17/2020	Common Stock	3,750	\$ 5.76	D	Â
Stock Option (right to purchase)	Â (1)	03/17/2020	Common Stock	15,003	\$ 5.76	D	Â
Stock Option (right to purchase)	12/10/2010	12/10/2020	Common Stock	11,252	\$ 6.13	D	Â
Stock Option (right to purchase)	12/05/2011	12/05/2021	Common Stock	2,960	\$ 6.13	D	Â
Stock Option (right to purchase)	12/18/2012	12/19/2022	Common Stock	3,750	\$ 13.28	D	Â
Stock Option (right to purchase)	Â (2)	12/19/2022	Common Stock	18,754	\$ 13.28	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				Other
	Director	10% Owner	Officer		
Altland James C/O ONCONOVA THERAPEUTICS, INC. 375 PHEASANT RUN NEWTOWN,Â PAÂ 18940	Â	Â	Â SVP, Finance & Corp. Develop.		Â

Signatures

/s/ James Altland 07/24/2013

**Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

This option, representing a right to purchase a total of 15,003 shares of Common Stock, is immediately exercisable and vests over 4 years

(1) from March 17, 2010, with 25% vesting on March 17, 2011 and 75% vesting in 36 equal monthly installments thereafter, subject to continued service to the Issuer through each vesting date.

This option, representing a right to purchase a total of 18,754 shares of Common Stock, is immediately exercisable and vests over 4 years

(2) from December 18, 2012, 25% vesting on December 18, 2013 and 75% vesting in 36 equal monthly installments thereafter, subject to continued service to the Issuer through each vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.