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

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 I JACOBS CINDY		2. Issuer Name and Ticker or Trading Symbol ONCOGENEX PHARMACEUTICALS, INC. [OGXI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director T. Officer (give title below) EVP, CMO			
(Last) 19820 NORTH CRE	I GITTERE AGA	3. Date of Earliest Transaction (Month/Day/Year) 06/12/2017									
BOTHELL, WA 980	4	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(Zip)	Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transact Code (Instr. 8)	ion	•		of (D)	Owned Following Reported	Form:	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		06/12/2017		М		5,000 (1)	A \$0		89,359	D	
Common Stock		06/12/2017		F		1,633 (2)	D	\$ 0.36	87,726	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative	2. Conversion	3. Transaction	3A. Deemed Execution Date, if	4. Transact				6. Date Exer Expiration D		7. Title and of Underlyin			9. Number of Derivative	10. Ownership	11. Nature of Indirect
Security (Instr. 3)		(Month/Day/Year)		Code)	Deri Secu Acq (A) Disp of (I	ivative urities uired or bosed D) tr. 3, 4,	(Month/Day		Securities		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Unit (RSU)	<u>(3)</u>	06/12/2017		М			5,000	<u>(4)</u>	06/12/2018	Common Stock	5,000	\$ 0	5,000	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
JACOBS CINDY 19820 NORTH CREEK PARKWAY, SUITE 201 BOTHELL, WA 98011			EVP, CMO				

Signatures

Sandra Thomson as attorney-in-fact for Cindy Jacobs	06/14/2017
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Represents shares of common stock acquired upon settlement of the restricted stock units ("RSUs") listed in Table II.
- (2) Represents shares of common stock that have been withheld by the issuer to satisfy the tax liability in connection with the settlement of RSUs and does not represent a sale by the reporting person.
- (3) Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock at settlement.
- (4) Pursuant to the terms of the RSU, 25% of the total shares underlying the RSU vest annually each anniversary of June 12, 2014, subject to the reporting person's provision of service to the issuer on 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.