FORM 4

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

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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).

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 Na	e Responses)	*		2.1	. NT		J.T: 1	· T	J:	01 1			5 Rel	lationshir	of Reportin	ng Person(s) t	o Issuer	
Name and Address of Reporting Person 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 X_Officer (give title below) EVP, CMO					
(Last) (First) (Middle) 19820 NORTH CREEK PARKWAY, SUITE 201				3. Date of Earliest Transaction (Month/Day/Year) 06/12/2015												EVF, CMO		
(Street)				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						
BOTHELI (City)	L, WA 980	(State)	(Zip)															
		(State)								ative S	ecuritie	s Acqui	ired, I	Disposed	of, or Bene	ficially Own	ed	
(Instr. 3) Date		 Transaction Date (Month/Day/Year) 			ate, if	Code (Instr.	: (4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Transaction(s)		d	Ownership Form:	7. Nature of Indirect Beneficial		
				(Month	onth/Day/Year)		de	V	amount	(A) or (D)	Price	(Instr. 3 and 4)				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common S	Stock		06/12/2015				M	ſ		,000 L)	A	\$ 0	66,3	6,327			D	
Common Stock 06/12/2015			06/12/2015			S			,408 2)	D	\$ 2.69	64,919			D			
			Table II -					in di uired	this f isplay: , Dispo	orm ars a cur	e not re rently v	equired alid O	d to re	espond ontrol r	unless the	tion contair e form	ed SEC	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, any (Month/Day/Year)		4. 5. Ni if Transaction of Code Deri r) (Instr. 8) Secu Acqu (A) 6 Disp of (I		umber 6. Date Expiratio (Month/E irrities uired per coosed o)) r. 3, 4,			Date ay/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		ıg		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Benefici Ownersh : (Instr. 4)		
				Code	V	(A)	(D)	Date Exer	e rcisable	Expira Date	ıtion	Title		Amount or Number of Shares				

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	06/16/2015
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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 sold by the issuer to satisfy the tax liability in connection with the settlement of RSUs.
- (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 on the later of (i) each anniversary of June 12, 2014; and (ii) the first day thereafter during which the issuer's trading window is open, 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.