SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

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 Reporting Person [*] <u>Meier Thomas</u>	Requiring S	vate of Event juiring Statement nth/Day/Year) 3. Issuer Name and Ticker or Trading Symbol Onconetix, Inc. [ONCO]							
(Last) (First) (Middle) C/O ONCONETIX, INC. 201 E. FIFTH STREET, SUITE 1900 (Street) CINCINNATI OH 45202 (City) (State) (Zip)			Issuer	ationship of Reporting all applicable) Director Officer (give title below)	10% C	wner (specify	Filec 6. In	d (Month/Day/ dividual or Jo eck Applicable Form filed b Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned									
[····································				unt of Securities ially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)			es 4. Conversion or Exercise Price of		Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title		Amount Derivati or Security Number of Shares		ve	Direct (D) or Indirect (I) (Instr. 5)	5)

Explanation of Responses:

No securities are beneficially owned.

/s/ Thomas Meier

02/16/2024

** Signature of Reporting

Date

Person

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 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).

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.