FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours nor resnance.	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*  RUDNICK SETH						2. Issuer Name and Ticker or Trading Symbol G1 Therapeutics, Inc. [ GTHX ]									lationship of Reportick all applicable)  Director  Officer (give title		ing Person(s) to Iss 10% Ov Other (s		Owne	vner	
(Last) (First) (Middle) C/O G1 THERAPEUTICS, INC. 79 T.W. ALEXANDER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 08/06/2018									below)		below)				
	RESEARCH TRIANGLE NC 27709				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
		Tab	ole I -	Non-Deri	vativ	e Sec	curit	ies A	cquir	red, C	Disposed (	of, or I	Benefic	cially	/ Owned						
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Execution		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amoun Securities Beneficia Owned Fo Reported	s lly ollowing	Form:	nership Direct Indirect tr. 4)	Indir Bene Own	eficial ership			
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock	08/06/2018			018	3		M <sup>(1)</sup>		10,000	A	\$0.3	39	10,000		D					
Common	Stock			08/06/20	018				S <sup>(1)</sup>		10,000	D	\$50.69	01 <sup>(2)</sup>	0.0	00	D				
Common	Stock														58,282			I		tnote <sup>(3)</sup>	
		-	Table								sposed of s, converti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)			Expi (Mor	ate Exe iration I nth/Day				8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	/e es ally ng d tion(s)	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	ip c E ) C ct (	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amo or Num of Shar	nber							
Stock Options (Right to	\$0.39	08/06/2018			M <sup>(1)</sup>			10,000		(4)	01/21/2024	Comm		000	\$0.00	30,6	07	D			

## **Explanation of Responses:**

- 1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price represents the weighted average price with a low of \$50.50 and a high of \$51.04. The Reporting Person undertakes to provide G1 Therapeutics, Inc., any security holder of G1 Therapeutics, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote 2 to this Form 4.
- 3. These shares are held in the Seth A. Rudnick 2014 GST Trust U/A Dated 03/01/2014 (the "Trust") for the benefit of the Reporting Person's heirs. The Reporting Person's spouse is trustee of the Trust. The Reporting Person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.
- 4. All shares underlying this option have vested.

## Remarks:

/s/ Jennifer Moses, attorney-infact

\*\* Signature of Reporting Person

08/06/2018

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.