The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM D**

Notice of Exempt Offering of Securities

OMB APPROVAL		
MB Number:	3235-0076	

Estimated average burden hours per response: 4.00

1. Issuer's Identity			
1. Issuel 3 lucituity			
CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001796280			X Corporation
Name of Issuer			Limited Partnership
Oric Pharmaceuticals, Inc.			Limited Liability Company
Jurisdiction of Incorporation/Org	ganization		General Partnership
DELAWARE			
Year of Incorporation/Organizat	ion		Business Trust
X Over Five Years Ago			Other (Specify)
Within Last Five Years (Spe	ecify Year)		
Yet to Be Formed	iony reary		
ret to be Formed			
2. Principal Place of Business	and Contact Information		
Name of Issuer			
Oric Pharmaceuticals, Inc.			
Street Address 1		Street Address 2	
240 E. GRAND AVE.		2ND FLOOR	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
SOUTH SAN FRANCISCO	CALIFORNIA	94080	(650) 388-5600
3. Related Persons			
Last Name	First Name		Middle Name
Chacko	Jacob		M.
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenu	e, 2nd Floor	
City	State/Province/Co		ZIP/PostalCode
South San Francisco	CALIFORNIA	,	94080
Relationship: X Executive Offi	cer X Director Promoter		
Clarification of Response (if Nec			
Last Name	First Name		Middle Name
Multani	Pratik		Middle Name
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenu	o 2nd Floor	
City	State/Province/Co		ZIP/PostalCode
South San Francisco	CALIFORNIA	uritiy	94080
Relationship: X Executive Offi			54000
· <u>—</u>			
Clarification of Response (if Neo	:essary): 		
Last Name	First Name		Middle Name
Piscitelli	Dominic		
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenu	e, 2nd Floor	
City	State/Province/Co	untry	ZIP/PostalCode
South San Francisco	CALIFORNIA		94080
Relationship: X Executive Offi	cer Director Promoter		

Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Heyman	Richard		
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenue, 2nd Floor		
City	State/Province/Country	ZIP/PostalCode	
South San Francisco	CALIFORNIA	94080	
Relationship: Executive Officer X D	_		
Relationship. Executive Officer D	mector Fromoter		
Clarification of Response (if Necessary):	:		
Last Name	First Name	Middle Name	
Dier	Mardi		
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenue, 2nd Floor		
City	State/Province/Country	ZIP/PostalCode	
South San Francisco	CALIFORNIA	94080	
Relationship: Executive Officer X D	_		
Clarification of Response (if Necessary):	:		
Last Name	First Name	Middle Name	
Hoerter	Steve	L.	
Street Address 1	Street Address 2		
c/o ORIC Pharmaceuticals, Inc.	240 E. Grand Avenue, 2nd Floor		
City	State/Province/Country	ZIP/PostalCode	
South San Francisco	CALIFORNIA	94080	
Relationship: Executive Officer X D	pirector Promoter		
Clarification of Response (if Necessary):	:		
	First Name	Middle News	
Last Name	FIIST Name	Middle Name	
Kunkel	Lori	мійше мате	
Kunkel Street Address 1		міааіе нате	
Kunkel	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor		
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country	ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc.	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor		
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA	ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA birector Promoter	ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary):	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name	ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie	ZIP/PostalCode 94080	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2	ZIP/PostalCode 94080	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc.	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor	ZIP/PostalCode 94080 Middle Name	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter : First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA	ZIP/PostalCode 94080 Middle Name	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary):	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): 4. Industry Group	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): 4. Industry Group Agriculture	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer X D Clarification of Response (if Necessary): 4. Industry Group	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080	
Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): 4. Industry Group Agriculture	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): Last Name You Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship: Executive Officer D Clarification of Response (if Necessary): 4. Industry Group Agriculture Banking & Financial Services	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology Health Insurance	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants Technology	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship:	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship:	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology Health Insurance	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants Technology Computers	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship:	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology Health Insurance Hospitals & Physicians Pharmaceuticals	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants Technology Computers Telecommunications	
Kunkel Street Address 1 c/o ORIC Pharmaceuticals, Inc. City South San Francisco Relationship:	Lori Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter First Name Angie Street Address 2 240 E. Grand Avenue, 2nd Floor State/Province/Country CALIFORNIA Director Promoter Health Care X Biotechnology Health Insurance Hospitals & Physicians	ZIP/PostalCode 94080 Middle Name ZIP/PostalCode 94080 Retailing Restaurants Technology Computers	

Is the issuer registered as an investment company under the Investment Company Act of 1940? Yes No Other Banking & Financial Services Business Services Energy Coal Mining Electric Utilities Energy Conservation Environmental Services Oil & Gas Other Energy	Real Estate Commercial Construction REITS & Finance Residential Other Real Estate	Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel Other
Revenue Range OR No Revenues	Aggregate Net Asset Value F No Aggregate Net Asset V \$1 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$50,000,001 - \$100,000,000 Cover \$100,000,000 Decline to Disclose Not Applicable Investment Company A Section 3(c)(1) Section 3(c)(2) Section 3(c)(4) Section 3(c)(5) Section 3(c)(6)	/alue
	Section 3(c)(7)	
7. Type of Filing		
X New Notice Date of First Sale 2023-06-27 [Amendment	First Sale Yet to Occur	
8. Duration of Offering		
Does the Issuer intend this offering to last more		
Type(s) of Securities Offered (select all that	t apply)	
Equity Debt Option, Warrant or Other Right to Acquire Ar Security to be Acquired Upon Exercise of Operation Right to Acquire Security	Tenai	ed Investment Fund Interests ent-in-Common Securities eal Property Securities e (describe)
10. Business Combination Transaction		

Is this offering being made in connection with a business combined merger, acquisition or exchange offer?	nation transaction, such as a $\qquad \qquad \qquad \qquad \qquad \boxed{\qquad }$ Yes $\boxed{\mathbb{X}}$ No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor \$0 USI	D	
12. Sales Compensation		
Recipient	Recipient CRD Number X None	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	
Street Address 1 City	Street Address 2 State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US	
13. Offering and Sales Amounts		
Total Offering Amount \$84,999,678 USD or Indefinite Total Amount Sold \$84,999,678 USD Total Remaining to be Sold \$0 USD or Indefinite Clarification of Response (if Necessary): 14. Investors		
Select if securities in the offering have been or may be sold enter the number of such non-accredited investors who alre Regardless of whether securities in the offering have been convestors, enter the total number of investors who already have been selected. 15. Sales Commissions & Finder's Fees Expenses	eady have invested in the offering. or may be sold to persons who do not qualify as accredited	12
Provide separately the amounts of sales commissions and finder an estimate and check the box next to the amount.	rs fees expenses, if any. If the amount of an expenditure is no	ot known, provide
Sales Commissions \$0 USD Estimate		
Finders' Fees \$0 USD Estimate		
Clarification of Response (if Necessary):		
16. Use of Proceeds		
Provide the amount of the gross proceeds of the offering that has be named as executive officers, directors or promoters in respon the box next to the amount.		
\$0 USD Estimate		
Clarification of Response (if Necessary):		
Signature and Submission		
Please verify the information you have entered and review that to file this notice.	he Terms of Submission below before signing and clicking	ng SUBMIT below
Terms of Submission		

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

• Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Oric Pharmaceuticals, Inc.	/s/ Jacob M. Chacko	Jacob M. Chacko	President & Chief Executive Officer	2023-07-05

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.

^{*} This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.