FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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>LEBEL FRANCOIS</u>							2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP]									of Reporting cable) or (give title	g Perso	n(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) C/O ZIOPHARM ONCOLOGY, INC., NAVY YARD ONE FIRST AVE., BLDG #34					106	3. Date of Earliest Transaction (Month/Day/Year) 06/09/2015									below)			below)	´
(Street) BOSTON MA 02129 (City) (State) (Zip)					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(=:5)				. Doris	/ativ/	0 50	ourit	ios Ao	quirod	Dic	nosod o	of or Do	nofic	ially	Ownod				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					saction	ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securitie Beneficia Owned F	nt of es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct c Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) o	r _{Prie}	ce	Reported Transact (Instr. 3 a	ion(s)				
Common Stock 06/09/						2015		М		50,00	0 A	\$	4.34	50,000]	D		
Common Stock 06/09/						2015		S		50,00	0 D	\$1	0.12	0]	D		
		7	Table II -								osed of, onverti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date, Transac			of E		Expiratio	6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		5	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	illy [Downership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amor or Numl of Share	oer					
Stock Option (right to	\$4.34	06/09/2015			М			50,000	(1)	1	.2/30/2023	Common Stock	50,0	00	\$0.00	100,00	00	D	

Explanation of Responses:

 $1. \ The option is vested with respect to 50,000 shares; the option vests with respect to the remaining 100,000 shares on 12/31/2015 and 12/31/2016.$

Remarks:

/s/ Caesar J. Belbel

06/11/2015

** Signature of Reporting Person

Date

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.