FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasiiiigton,	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: 3235-0287

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*  WEISER MICHAEL						2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ ZIOP ]									ck all applic	ionship of Reporting all applicable) Director		on(s) to Issu 10% Ow	ner
	PHARM O	irst) NCOLOGY, INO UE, PARRIS BL														Other (s below)	pecify		
(Street) BOSTO	N M	ÍA.	02129 (Zip)		-   4. I -	4. If Amendment, Date of Original Filed (Month/Day/Year)									lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tab	le I - Noi	n-Deriv	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or I	3ene	ficially	/ Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A (C	) or ))	Price	Reported Transact (Instr. 3	tion(s)		[	(Instr. 4)
Common	ommon Stock			06/1	06/12/2017				М		15,00	0	Α	\$4.85	218	3,670		D	
Common	Stock			06/1	2/201	7			F		13,300	<b>)</b> (1)	D	\$5.47	205	5,370	70 D		
		7	Table II -								osed of, onverti				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 D if any (Month/Day/	Date, Transac Code (I			of Deri Sec Acq (A) ( Disp of (I	of E		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)		e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	umber					
Stock Option (Right to	\$4.85	06/12/2017			M			15,000	(2)		06/18/2017	Comm		5,000	\$0.00	0		D	

## **Explanation of Responses:**

- 1. Represents shares withheld to pay exercise price.
- 2.5,000 shares vested and became exercisable on each of 6/18/08, 6/18/09 and 6/18/10.

## Remarks:

/s/ Caesar J. Belbel, Attorney-In-Fact

06/14/2017

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\*\* 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.