FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
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0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>LEWIS JONATHAN</u>												X	Director		10% O	vner		
-												x		give title	Other (specify		
(Last)	(F	irst)	(Middle)				Transa	action (Mont	h/Day/Year)			below)					
C/O ZIOPHARM ONCOLOGY, INC.,					06/27/2013							CEO						
ONE FIRST AVENUE., BLDG 34																		
				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	6. Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)						
BOSTO	N M	ΙA	02129) X	_	,	eporting Perso			
				_									Form fil Person	ed by More t	han One Repo	ting		
(City)	(S	tate)	(Zip)										Person					
		Та	ble I - Non-D	erivati	ve Se	curities	s Acc	quired, D	isposed	of, o	r Ben	eficially	Owned					
1. Title of S	Security (Inst	r. 3)		ransactio					(A) or	or 5. Amount of		. Ownership	7. Nature of					
Date (Month				Execution D Day/Year) if any						. 3, 4 and 5) Securities Beneficia			Indirect Beneficial				
			[,	(Month/Day/Year							Owned Fo	ollowing (i) (Ir) (Instr. 4)	Ownership (Instr. 4)		
								Code V	Amour	ıt	(A) or (D)		Transacti	on(s)		111511.4)		
									7		(D) Thec		(Instr. 3 and 4)					
			Table II - Der	ivative	e Sec	urities	Acqu	uired, Dis	posed o	f, or I	Benef	ficially (Owned					
			(e.g	., puts	s, cal	ls, warr	ants.	, options	conver	tible s	secur	ities)						
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	er of	6. Date Exer	cisable and	7. Ti	tle and	Amount	8. Price of	9. Number o	of 10.	11. Nature		
Derivative Security	Conversion Date or Exercise (Month/Day/Year)		Execution Date, if any	Transa				Expiration Date of Securities (Month/Day/Year) Underlying		S	Derivative Security	derivative Securities	Ownership Form:	of Indirect Beneficial				
(Instr. 3) Price of (Month/Day/Year)					Acquired (A)			Derivative Secur				(Instr. 5)	Beneficially	Direct (D)	Ownership			
	Derivative Security				or Disposed of (D) (Instr.		(Instr. 3 and 4)			4)		Owned Following	or Indirect (I) (Instr. 4)					
					3, 4 and 5)							Reported Transaction(s)						
												Amount		(Instr. 4)	(3)			
								Date	Expiration	.		or Number						
				Code	V	(A)	(D)	Exercisable	Date	Title	• (of Shares						
Employee																		
Stock Option	\$2.3	06/27/2013		A		330,000		(1)	06/27/202		mon	330,000	\$0.00	330,000	D			
Right to		30,2.,2013]			-0,2,,202	Sto	ock '		40.00]				
Buy)			1	1			1		1	1				1	- 1			

Explanation of Responses:

1. 110,000 shares vest on each of 6/27/2014, 6/27/2015 and 6/27/2016.

Remarks:

/s/ Jonathan Lewis

06/28/2013

** 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.