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## 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(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours per response:	0.5									

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Instruc	tion 1(b).			Fil							ties Exchan mpany Act		1934						0.0	
1. Name and Address of Reporting Person <sup>*</sup> Fowler Wyche						2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ ZIOP ]									lationship o ck all applio Directo	,		son(s) to Iss 10% Ov		
(Last) 701 A S	Last) (First) (Middle) 701 A STREET NE						3. Date of Earliest Transaction (Month/Day/Year) 03/31/2010									Officer (give title Other (specify below) below)				
(Street) WASHIN (City)	NGTON	DC (State)	20002 (Zip)		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					n	
1. Title of Security (Instr. 3) 2. Trans Date					Isactio	action Day/Year) 24. Deemed Execution Date, if any (Month/Day/Year)				3. Transaction Code (Instr. 5)			ired (A)	) or 4 and 5. Amou Securitie Benefici Owned I Reporte		nt of s ally collowing l ion(s)	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	Common Stock, \$.001 par value 03/32					2010		A <sup>(1)</sup>		15,00	(D)		\$0	(Instr. 3 and 4) 67,500 <sup>(2)</sup>		D				
			Table II -								osed of, converti				Dwned					
1. Title of Derivative Security (Instr. 3) 2. Conversio or Exercis Price of Derivative Security			Date,	4. Transaction Code (Instr. 8)		n of E		Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivativ Security urity (Instr. 5)		9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e Ownershi 5 Form: Ily Direct (D) or Indirect 9 (I) (Instr. 4	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	ate Expiration		Amou or Numl of Share	ber							
Director Stock Option (right to buy)	\$4.31								12/22/20	06	12/22/2014	Commor Stock, \$.001 pa value	15.0	29		15,02	9	D		
Director Stock Option (riht to buy)	\$5.01								04/26/20	06	04/26/2016	Commor Stock	<sup>1</sup> 15,0	00		15,00	0	D		
Director Stock Option (right to	\$6.49								12/13/20	06	12/13/2016	Commor Stock	<sup>1</sup> 15,0	00		15,00	0	D		

Option (right to buy)	\$6.49				12/13/2006	12/13/2016	Common Stock	15,000		15,000	D
Stock Option (right to buy)	\$4.85				(3)	06/18/2017	Common Stock	15,000		15,000	D
Stock Option (right to buy)	\$2.73				(4)	12/12/2017	Common Stock	20,000		20,000	D
Stock Option (right to buy)	\$0.7				(5)	05/13/2019	Common Stock	15,000		15,000	D
Stock Option (right to buy)	\$2.85				(6)	12/31/2019	Common Stock, \$.001 par value	7,500		7,500	D
Stock Option (right to buy)	\$5.09	03/31/2010	A	15,000	03/31/2011	03/31/2020	Common Stock, \$.001 par value	15,000	\$0	15,000	D

## Explanation of Responses:

1. Grant of restricted stock; restrictions lapse on the anniversary of the date of grant.

2. In addition to the current grant, includes a prior grant of restricted stock with restrictions that will lapse as to 3,750 shares on each of December 31, 2010 and December 31, 2011.

3. 5,000 shares vest on each of 6/18/08, 6/18/09 and 6/18/10.

4. 6,667 shares vest on each of 12/12/08 and 12/12/09; 6,666 shares vest on 12/12/10.

5. 5,000 shares vest on each of 12/31/09, 6/30/2010 and 12/31/2010.

## <u>/s/ Wyche Fowler</u>

<u>04/01/2010</u> Date

\*\* Signature of Reporting Person

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.