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: 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>LEWIS JONATHAN</u>						2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ ZIOP ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) 1180 AV FLOOR	1180 AVENUE OF THE AMERICAS, 19TH						of Earlie 2007	est Tra	unsaction (Mc	nth/E	ay/Year)	_ :	X Officer (give title Other (specify below)  CEO							
(Street) NEW YORK NY 10036				4. 1	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						
(City) (State)			(Zip)												Persor	1				
		Tal	ole I - Nor	n-Deri	vativ	e Se	curit	ies A	cquired,	Disp	osed	of, or B	ene	ficiall	y Owned					
1. Title of Security (Instr. 3)  2. Trans. Date (Month/I				saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amou Securitie Beneficia Owned F Reported	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amoun	t (A)	or	Price	Transaction(s) (Instr. 3 and 4)				(	
Common Stock, \$.001 par value 03/12				2/200	/2007			P		2,00	000 A		\$4.95	2,000		D				
		•	Table II -	Deriva (e.g., ¡	ative puts,	Sec cal	uritie Is, wa	s Ac rran	quired, D ts, option	ispo s, c	sed o	f, or Be	nefi curit	cially ies)	Owned					
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, Trans Code			of Ex		Expiration D	Date Exercisable and piration Date lonth/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	or Nu	ount nber Shares						
Stock Option (right to buy)	\$0.08								01/08/2007	01/	08/2014	Common Stock	25	5,674		25,674		D		
Stock Option (right to buy)	\$0.08								01/27/2007	01/	27/2014	Common Stock	24	2,979	242,9		79	D		
Stock Option (right to buy)	\$4.31								01/27/2007	06/	08/2015	Common Stock	87	7,789		87,78		D		
Stock Option (right to buy)	\$4.31								01/27/2007	09/	13/2015	Common Stock	54	l,161		54,161		D		
Stock Option (right to buy)	\$5.01								04/26/2006	04/	26/2016	Common Stock	13	9,315		139,31	15	D		
Stock Option (right to buy)	\$5.01								04/26/2006	04/	26/2016	Common Stock	75	5,000		75,00	0	D		
Stock Option (right to	\$6.49								(1)	12/	13/2016	Common Stock	30	),000		30,00	0	D		

## **Explanation of Responses:**

1. 10,000 shares vest on each of 12/13/07, 12/13/08 and 12/13/09.

/s/ Jonathan Lewis

03/13/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.