FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Lafond Kevin G</u>				2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP]					(Ch	eck all applic	,		on(s) to Issu 10% Ow Other (s)	ner		
(Last) C/O ZIO	`	rst) NCOLOGY, INO	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/27/2013						helow)		easure	below)	·	
1 FIRST AVE. PARRIS BLDG. #34, NAVY YARD				4. If Amendment, Date of Original Filed (Month/Day/Year)					6.0	6. Individual or Joint/Group Filing (Check Applicable						
(Street)	N M	A	02129		4. If Americanient, Date of Original Fried (World Day Feat)					Line	X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St	tate)	(Zip)									Persor				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,		Code (Instr. 5)			Beneficia	es Formally (D) Following (I) (I		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3	ion(s)			(
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Code (Instr.				6. Date Exercisable and Expiration Date (Month/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 (Instr. 4)	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$2.3	06/27/2013		A		82,500		(1)	06/27/2013	Common Stock	82,500	\$0.00	82,500	0	D	

Explanation of Responses:

1. 27,500 shares vest on each of 6/27/2014, 6/27/2015 and 6/27/2016.

Remarks:

/s/ Kevin G. Lafond

06/28/2013

** 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.