FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES I | N BENEFICIAL | OWNERSHIP |
|-----------|--------------|--------------|-----------|
| | | | |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

| 1. Name and Address of Reporting Person* <u>BRENNAN MURRAY</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|---------------|--|--|---------------------------------------|--|--|------------|-------------|---|-------|--------------------------------|---|---|---|---|---|---------------------------------|--|--|
| (Last) MEMOF | RIAL SLOA | irst) AN KETTERING | (Middle) G CANCER | | 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2007 | | | | | | | | | | Officer (give title below) | | Other (specify below) | | pecify |
| 1275 YC | ORK AVEN | UE | | | 4. 1 | If Ame | endment, I | Date | of Original | Filed | (Month/Da | ay/Year) | | 6. Indivi Line) | dual or J | oint/Group | Filing | (Check App | olicable |
| (Street) NEW YORK NY 10021 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | itate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tak | ole I - Non | -Deriv | ativ | e Se | curities | s Ac | quired, | Disp | osed o | f, or Be | nefic | ially C | Owned | | | | |
| , (| | | Date | Transaction ate lonth/Day/Year) | | 2A. Deemed Execution Date if any (Month/Day/Yea | | Code (Instr | | | | | 4 and Securitie Benefici | | es For ially (D) Following (I) (| | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) (D) | Prio | . I | Transacti (Instr. 3 a | ion(s) | | | (1130.4) |
| Common Stock, \$.001 par value | | | | | | | | | | | | | | | 0 | | | D | |
| | | - | Table II - D | | | | | | uired, D s, option | | | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion Da | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | ate, 4 | 4. Transaction Code (Instr. 8) | | 5. Number | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | able and 7. Title ar of Securi | | nd Amou ties ng e Securi | int 8. De | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | xpiration ate | Title | Amou or Numb of Share | er | | | | | |
| Director Stock Option | \$4.31 | | | | | | | | (1) | 1 | 2/22/2014 | Common Stock, \$.001 par value | 15,0 | 29 | | 15,029 |) | D | |
| Stock Option (right to buy) | \$5.01 | | | | | | | | 04/26/200 | 6 0 | 4/26/2016 | Common Stock | 15,0 | 00 | | 15,000 |) | D | |
| Stock Option (right to buy) | \$6.49 | | | | | | | | (2) | 1 | 2/13/2016 | Common Stock | 15,0 | 00 | | 15,000 |) | D | |
| Stock Option (right to | \$4.85 | 06/18/2007 | | | A | | 15,000 | | (3) | 0 | 6/18/2017 | Common Stock | 15,0 | 00 | \$0 | 15,000 | | D | |

Explanation of Responses:

- 1. 7,515 shares vest on 12/22/05 and 7,514 shares vest on 12/22/06.
- 2. 5,000 shares vest on each of 12/13/07, 12/13/08 and 12/13/09.
- $3.\,5,000$ shares vest on each of $6/18/08,\,6/18/09$ and 6/18/10.

/s/ Murray Brennan 06/19/2007

** 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.