FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

TATEMENT 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* MCINERNEY TIMOTHY | | | | | | | 2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP] | | | | | | | | | | nship o I applio Directo | cable) | g Pers | son(s) to Iss 10% O | |
|--|--|--|---|---------|-------|--|--|---|--|------------------------------------|----------|------------------|---------------|----------------|---|---|---|--|--|--|------------|
| (Last) ONE CO | (F | * | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2014 | | | | | | | | | | | Officer below) | (give title | | Other (sbelow) | specify |
| (Street) HOPEW (City) | | tate) | 08525 (Zip) | D i | - | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applica Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | | | n | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | saction | ı | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. Securit Transaction Disposed Code (Instr. 5) | | | ties A | cquire | d (A) or | or 5. Amou 4 and Securitie Benefici | | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Tr | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 09/15/ | | | | | 5/201 | ′2014 | | | X | | 50,000 A | | A | \$2.0 | 4 | 333,463 | | | D | | |
| | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | | ransaction Code (Instr. | | umber ivative urities uired or oosed D) (Instr. and 5) | Ex | Date Exe piration I onth/Day | Date | of Securities | | es Security | Deriv Secu | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Over the control of t | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Dat | te ercisable | | xpiration ate | Title | | Amount or Number of Shares | | | | | | |
| Common Stock Warrants (right to | \$2.04 | 09/15/2014 | | | X | | | 50,000 | 09 |)/15/2009 | 0 | 9/15/2014 | Com | | 50,000 | \$0 | 0.00 | 0 | | D | |

Explanation of Responses:

Remarks:

/s/ Jonathan Lewis, Attorney-

09/16/2014

In-Fact

** 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.