

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT
PURSUANT TO SECTION 13 OR 15(d) OF
THE SECURITIES EXCHANGE ACT OF 1934

Date of report (date of earliest event reported): November 2, 2006

ZIOPHARM Oncology, Inc.

(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction of
incorporation)

0-32353
(Commission File Number)

84-1475642
(IRS Employer Identification No.)

1180 Avenue of the Americas, 19th Floor
New York, NY 10036
(Address of principal executive offices) (Zip Code)

(646) 214-0700
(Registrant's telephone number, including area code)

(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
 - Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
 - Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
 - Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))
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Item 8.01. Other Events.

On November 2, 2006 and November 3, 2006, the Company issued press releases and such press releases are attached hereto as Exhibits 99.1 and 99.2 and are incorporated herein by reference.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

99.1 Press Release dated November 2, 2006.

99.2 Press Release dated November 3, 2006.

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Date: November 3,
2006

ZIOPHARM Oncology, Inc.:
(Registrant)

By: /s/ Richard E. Bagley

RICHARD E. BAGLEY, President, *Chief
Operating Officer and Chief Financial Officer*

Exhibit Index

<u>Exhibit No.</u>	<u>Description</u>
99.1	Press Release dated November 2, 2006
99.2	Press Release dated November 3, 2006

ZIO-201 Preclinical Data Demonstrate Effectiveness in Pediatric Cancers

-- CTOS Presentations Support Phase I/II Sarcoma Trials and Planned Trial in Pediatric Cancers --

VENICE, ITALY - November 2, 2006 - ZIOPHARM Oncology, Inc. (NASDAQ: ZIOP) and colleagues today presented new data on the effect of ZIO-201 on several human pediatric sarcoma models (Ewing sarcoma, rhabdomyosarcoma, synovial sarcoma and osteosarcoma) demonstrating potent anti-cancer activity. Importantly, the results were comparable for ZIO-201 administered as a single dose, a schedule currently being explored in phase I clinical study, or as three consecutive daily doses, as is scheduled in the initial phase I and the sarcoma phase I/II trials. Also, ZIO-201 was active in cyclophosphamide-resistant osteosarcoma, the most common pediatric bone cancer in the United States. Children presenting initially with metastatic disease typically have a very low survival rate. Cyclophosphamide and the related drug ifosfamide are widely used alkylating agents for treating a number of cancers including sarcoma.

“I think this data is particularly exciting because it suggests that ZIO-201 may be an effective new agent that potentially bypasses mechanisms of resistance and toxicity that limit the use of cyclophosphamide and ifosfamide,” commented Dr. Anders Kolb, Assistant Professor of Pediatrics at the Albert Einstein College of Medicine and the lead investigator on this study. These data were presented at the Connective Tissue Oncology Society (CTOS) meeting in Venice, Italy. Data from the initial ZIO-201 phase I clinical studies with intravenous (IV) administration will also be presented at the CTOS meeting by Dr. Robert Benjamin and colleagues from The University of Texas M. D. Anderson Cancer Center, Karmanos Cancer Center and Premier Oncology.

Resistance to cyclophosphamide (CPA) and ifosfamide (IFOS) is a major obstacle to overcome in cancer treatment. CPA and IFOS are pro-drugs that cannot kill cells unless activated by an intracellular enzyme (aldehyde dehydrogenase 3A1; ALDH). Cancer cells typically escape killing by CPA and IFOS by developing high intracellular levels of ALDH. Because ZIO-201 (isophosphoramidate mustard) is the activated form of IFOS, killing of sarcoma cells is direct and immediate and does not require activation by ALDH. Similarly, high intracellular levels of ALDH should not inhibit sarcoma cell-killing by ZIO-201. Gorlick, Kolb and colleagues demonstrate here that sarcoma cell lines with high intracellular ALDH-levels were not killed by CPA but were readily killed by ZIO-201. Furthermore, mice with xenografts of CPA-resistant human sarcoma cells had a more than 5-fold reduction in sarcoma growth when treated with ZIO-201; CPA therapy had no effect. These data imply that ZIO-201 should be active in CPA- and IFOS-resistant sarcomas in humans. These data support not only the ongoing IV clinical studies in adult sarcoma but also are intriguing with regard to a subsequent IV phase I/II trial in children’s cancers as well as other trials involving different routes and form of administration.

About ZIO-201

ZIO-201 (isophosphoramidate mustard-lysine; IPM-Lys), the active moiety of IFOS, is a bi-functional alkylator that causes irreparable inter-strand DNA cross-linking resulting in cell death. ZIO-201 is as or more active than IFOS in diverse cancer models. Unlike IFOS which is a pro-drug, ZIO-201 is directly active against cancer cells. Also, unlike IFOS, ZIO-201 is not metabolized to acrolein or chloroacetaldehyde which cause bladder or central nervous system toxicities. ZIO-201 is in phase I and I/II trials in diverse cancers exploring maximum tolerated dose at alternate schedules. Clinical activity (stable disease) in subjects with advanced cancers (including those resistant to IFOS) has been seen.

About ZIOPHARM Oncology, Inc.

ZIOPHARM Oncology, Inc. is a biopharmaceutical company engaged in the development and commercialization of a diverse, risk-sensitive portfolio of in-licensed cancer drugs to address unmet medical needs. The Company applies new insights from molecular and cancer biology to understand the efficacy and safety limitations of approved and developmental cancer therapies and identifies proprietary and related molecules for better patient treatment. For more information, visit www.ziopharm.com.

Forward-Looking Safe Harbor Statement:

This press release contains forward-looking statements for ZIOPHARM Oncology, Inc. that involve risks and uncertainties that could cause the Company's actual results to differ materially from the anticipated results and expectations expressed in these forward-looking statements. These statements are based on current expectations, forecasts and assumptions that are subject to risks and uncertainties, which could cause actual outcomes and results to differ materially from these statements. Among other things, there can be no assurance that any of the Company's development efforts relating to its product candidates will be successful, or such product candidates will be successfully commercialized. Other risks that affect forward-looking information contained in this press release include the possibility of being unable to obtain regulatory approval of the Company's product candidates, the risk that the results of clinical trials may not support the Company's claims, and risks related to the Company's ability to protect its intellectual property and its reliance on third parties to develop its product candidates. The Company assumes no obligation to update these forward-looking statements, except as required by law.

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Contact:

Suzanne McKenna

Investors

(646) 214-0703

Tina Posterli

Media

(917) 322-2565

tposterli@rxir.com

ZIOPHARM Presents ZIO-201 Phase I Data at CTOS

-- Data Support Expanded Clinical Development Program --

VENICE, ITALY - November 3, 2006 - ZIOPHARM Oncology, Inc. (NASDAQ: ZIOP) announced today the presentation of updated clinical data on ZIO-201 at the Connective Tissue Oncology Society (CTOS) meeting in Venice. Related new preclinical data for ZIO-201 was the subject of an earlier presentation at CTOS. ZIO-201 is a proprietary form of the therapeutic active metabolite of ifosfamide (IFOS), a drug that is the standard of care in the treatment of sarcoma and is widely used in the treatment of lymphoma and pediatric cancers. IFOS is associated with severe toxicity to the bladder and the central nervous system because of the presence of two other metabolites - acrolein and chloroacetaldehyde. These toxicities can be particularly troubling, especially in the treatment of pediatric cancers.

The safety and dose-ranging phase I studies utilized ZIO-201 administered daily for three consecutive days each four weeks (1 cycle) and were conducted at the University of Texas M. D. Anderson Cancer Center in Houston, the Karmanos Cancer Center in Detroit and Premier Oncology in Santa Monica. The results demonstrated evidence of clinical activity in sarcoma (2/11 patients including at least one who had failed IFOS therapy) and mesothelioma (1 patient with extended stable disease). The maximum tolerated dose (MTD) of ZIO-201 on this schedule was 400 mg/me²/d. There was little bone marrow toxicity and no hemorrhagic cystitis (bladder toxicity) or CNS toxicity. The dose limiting toxicity was characterized by electrolyte imbalances. This MTD is comparable to IFOS doses of greater than 25 g/me² and this dose achieves serum levels that are 25-fold higher than doses that kill 50% of human sarcoma cell lines.

“These phase I results with ZIO-201 are encouraging,” commented Dr. Brian Schwartz, Chief Medical Officer at ZIOPHARM. “Avoiding the more serious toxicities associated with the administration of ifosfamide at doses that are much higher than the equivalent ifosfamide dose is what we were hoping to see. We are presently continuing the phase I trial with a single monthly administration of ZIO-201, a regimen that is strongly supported by the preclinical data presented yesterday at CTOS. The phase II trial in sarcoma with the 3-day regimen continues. We are also planning for a pediatric phase I/II trial, exploring the possibility of administering intrathecally for metastatic brain cancer, and moving forward with an oral form.”

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