

ZIOPHARM ONCOLOGY INC  
 Form 4  
 January 22, 2007

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2005  
 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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 LEWIS JONATHAN

2. Issuer Name and Ticker or Trading Symbol  
 ZIOPHARM ONCOLOGY INC  
 [ZIOP]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 1180 AVENUE OF THE AMERICAS, 19TH FLOOR  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 12/13/2006

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
 CEO

NEW YORK, NY 10036

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|-----------------------------------|
|                                 |                                      |  |                                | (A) or (D) Price  |   |  |                                   |
| Common Stock, \$.001 par value  |                                      |  |                                |   | 0   | D  |                                   |

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

**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 control number.**

SEC 1474 (9-02)

Edgar Filing: ZIOPHARM ONCOLOGY INC - Form 4

**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 Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) |              |                            |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|--------------|----------------------------|
|  |  |                                      |  | Code                           | V (A) (D)   | Date Exercisable   | Expiration Date   | Title        | Amount or Number of Shares |
| Stock Option (right to buy)                | \$ 0.08  |                                      |  |                                |   | (1)  | 01/08/2014  | Common Stock | 25,674                     |
| Stock Option (right to buy)                | \$ 0.08  |                                      |  |                                |   | (2)  | 01/27/2014  | Common Stock | 242,979                    |
| Stock Option (right to buy)                | \$ 4.31  |                                      |  |                                |   | (3)  | 06/08/2015  | Common Stock | 87,789                     |
| Stock Option (right to buy)                | \$ 4.31  |                                      |  |                                |   | (4)  | 09/13/2015  | Common Stock | 54,161                     |
| Stock Option (right to buy)                | \$ 5.01  |                                      |  |                                |   | 04/26/2006   | 04/26/2016  | Common Stock | 139,315                    |
| Stock Option (right to buy)                | \$ 5.01  |                                      |  |                                |   | 04/26/2006   | 04/26/2016  | Common Stock | 75,000                     |
| Stock Option (right to buy)                | \$ 6.49  | 12/13/2006                           |  | A                              | 30,000  | (5)  | 12/13/2016  | Common Stock | 30,000                     |

## Reporting Owners

Reporting Owner Name / Address

**Relationships**

Director 10% Owner Officer Other

LEWIS JONATHAN  
1180 AVENUE OF THE AMERICAS, 19TH FLOOR  
NEW YORK, NY 10036

X

CEO

## Signatures

/s/ Jonathan  
Lewis

01/19/2007

\*\*Signature of  
Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) 8,558 shares vest on each of 1/8/05, 1/8/06 and 1/8/07.
- (2) 80,993 shares vest on each of 1/27/05, 1/27/06 and 1/27/07.
- (3) 29,263 shares vest on each of 6/8/05, 1/27/06 and 1/27/07.
- (4) 18,054 shares vest on each of 9/13/05 and 1/27/06; 18,053 shares vest on 1/27/07.
- (5) 10,000 shares vest on each of 12/13/07, 12/13/08 and 12/13/09.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.  
Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.