#### ZIOPHARM ONCOLOGY INC

Form 4 January 03, 2013

### FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

obligations

may continue.

Form 5

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Symbol

[ZIOP]

(Month/Day/Year)

Filed(Month/Day/Year)

12/31/2012

### 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

2. Issuer Name and Ticker or Trading

ZIOPHARM ONCOLOGY INC

3. Date of Earliest Transaction

4. If Amendment, Date Original

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

BELBEL CAESAR J

(Last) (First)

(Middle)

(Zip)

C/O ZIOPHARM ONCOLOGY.

(State)

12/31/2012

INC.,, ONE FIRST AVE., BLDG. 34

(Street)

**BOSTON, MA 02129** 

(City)

Common

Stock

OMB 3235-0287 Number: January 31,

**OMB APPROVAL** 

Expires: 2005 Estimated average

burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director 10% Owner X\_ Officer (give title Other (specify

below) below)

EVP, CLO, and Secretary

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

D

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

4. Securities Acquired 5. Amount of

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Month/Day/Year)

Code (D) (Instr. 8)

Code V Amount

F

2,284

(1)

Transaction(A) or Disposed of (Instr. 3, 4 and 5)

D

Beneficially Owned Following Reported Transaction(s)

Securities

(D) or Indirect (I) (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership (Instr. 4)

(A) or (Instr. 3 and 4) (D) Price

4.21

58,187

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

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: ZIOPHARM ONCOLOGY INC - Form 4

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 onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	At Nu Sh
Employee Stock Option (right to buy)	\$ 4.16	12/31/2012		A	150,000	(2)	12/31/2022	Common Stock	1:
Common Stock (tax withholding right)	\$ 4.21	12/31/2012		F	4,909 ( <u>3)</u>	<u>(4)</u>	<u>(4)</u>	Common Stock	

### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

BELBEL CAESAR J C/O ZIOPHARM ONCOLOGY, INC., ONE FIRST AVE., BLDG. 34 BOSTON, MA 02129

EVP, CLO, and Secretary

### **Signatures**

/s/ Caesar J.
Belbel

\*\*Signature of Date

\*\*Signature of
Reporting Person

## **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) Represents shares withheld to satisfy withholding tax obligations upon the vesting of restricted stock grants.
- (2) 50,000 shares shall vest on each of 12/31/2013, 12/31/2014 and 12/31/2015.
- (3) Represents shares withheld to satisfy additional voluntary tax withholding obligations not in connection with the vesting of restricted stock grants.
- (4) Not Applicable

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.

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