SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5

	of Section So(ii) of the investment company Act of 1540						
1. Name and Address of Reporting Person [*]	2. Issuer Name and Ticker or Trading Symbol ZIOPHARM ONCOLOGY INC [ZIOP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KIRK RANDAL J		X Director X 10% Owner					
,	-	Officer (give title Other (specify					
(Last) (First) (Middle)	3. Date of Earliest Transaction (Month/Day/Year)	below) below)					
C/O LEGAL DEPARTMENT	08/23/2011						
1881 GROVE AVENUE							
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)		Line) Form filed by One Reporting Person					
RADFORD VA 24141		Form filed by Mara than One Baparting					
	_	X Person					
(City) (State) (Zip)							

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

Table 1 Hon Derivative decurrices Adquired, Disposed of, or Derivitiany officer																
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		Disposed Of (D) (Instr. 3, 4 and 5)		Disposed Of (D) (Instr. 3, 4 and		Disposed Of (D) (Instr. 3, 4 and 5)		Disposed Of (D) (Instr. 3, 4 and b) Disposed Of (D) (Instr. 3, 4 and Beneficially Owned 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	Reported Transaction(s) (Instr. 3 and 4)		(1150. 4)						
Common Stock	08/23/2011		Р		38,294	A	\$4.99	1,346,462	I	By Kapital Joe, LLC ⁽¹⁾						
Common Stock								7,973,161	I	By Intrexon Corporation ⁽²⁾						
Common Stock								25,000	D							

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

Derivative Presenting (math 3) Date Presenting				(e.y., p	uis, c	ans	, wan	ants,	options,	convertio	ie set	Junites						
I. Name and Address of Reporting Person" KIRK RANDAL J (Last) (First) (Middle) CO LEGAL DEPARTMENT 1881 GROVE AVENUE (Street) RADFORD VA 24141 (City) (State) (Zip) 1. Name and Address of Reporting Person" I. State) (Zip) I. State) (Zip) I. State) (Zip) I. Name and Address of Reporting Person" I. State) (State) (Zip) I. Name and Address of Reporting Person" I. State) (State) (Zip) I. State) (Zip) I. State) (Zip) I. Name and Address of Reporting Person" I. State) (State) (Zip) I. State) (Zip) I. State) (State) (Zip) I. State) (Zip) I. State) (Zip) I. State) (Site) (Site	Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Date, if any	Transa Code (of Deriv Secu Acqu (A) of Dispo of (D) (Instr	ative rities ired osed . 3, 4	Expiration Da	ate	Amount of Securities Underlying Derivative Security (Instr. 3		Derivative Security	erivative derivative scurity Securities (str. 5) Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or Indirect	Ownership Form: Direct (D) or Indirect	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
I. Name and Address of Reporting Person* KIRK RANDAL J (Last) (First) (Middle) C/O LEGAL DEPARTMENT 1881 GROVE AVENUE (Street) RADFORD VA 24141 (Cr(ty) (State) (Zip) 1. Name and Address of Reporting Person* (Middle) C/O LEGAL DEPARTMENT 1. Name and Address of Reporting Person* INTRE XON CORP (State) (Zip) 1. Name and Address of Reporting Person* (Street) (Last) (First) (Middle) C/O LEGAL DEPARTMENT 20876 Street) (Street) COLEGAL DEPARTMENT 20876 Street) COLEGAL DEPARTMENT 20876 (Street) Cole (State) (Street) COLEGAL DEPARTMENT 20876 (Street) COLEGAL DEPARTMENT 20876 (Street) Cole (State) (Street)																		
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(Street) RADFORDVA24141(City)(State)(Zip)1. Name and Address of Reporting Person'INTREXON CORP[Last)(First)(Middle)C/O LEGAL DEPARTMENT20358 SENECA MEADOWS PARKWAY[Street) GERMANTOWNMD20876	C/O LEC	GAL DEPA	RTMENT															
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(Last) (First) (Middle) C/O LEGAL DEPARTMENT 20358 SENECA MEADOWS PARKWAY (Street) GERMANTOWN MD 20876	1. Name ar	nd Address of	Reporting Person*															
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GERMANTOWN MD 20876	20358 SH	ENECA M	EADOWS PARK	KWAY														
	(Street)					-												
(City) (State) (Zip)	GERMA	NTOWN	MD	20876														
	(City)		(State)	(Zip)														

Explanation of Responses:

1. Randal J. Kirk controls Kapital Joe, LLC ("Kapital Joe"). Shares held by Kapital Joe may be deemed to be indirectly beneficially owned (as defined under Rule 13d-3 promulgated under the Securities Exchange Act of 1934, as amended) by Mr. Kirk. Mr. Kirk disclaims beneficial ownership of such shares, except to the extent of any pecuniary interest therein.

2. Randal J. Kirk, directly and through certain affiliates, has voting and dispositive power over a majority of the outstanding capital stock of Intrexon Corporation. Mr. Kirk may therefore be deemed to have voting and dispositive power over the shares of the issuer owned by Intrexon Corporation. Mr. Kirk disclaims beneficial ownership of such shares, except to the extent of any pecuniary interest therein.

Remarks:

/s/ Randal J. Kirk, CEO of 08/25/2011

Intrexon Corporation /s/ Randal J. Kirk

08/25/2011

Date

** Signature of Reporting Person

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.