Edgar Filing: CANNON JAMES ANTHONY - Form 4

CANNON JA Form 4 January 02, 2	AMES ANTHO	DNY									
FORM		CURITIES AND EXCHANGE COM						PROVAL 3235-0287			
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru	er STATE 5. Filed pr ¹⁵ Section 17	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL SECURITIES Filed pursuant to Section 16(a) of the Securities Ex Section 17(a) of the Public Utility Holding Company					xchang Act of	e Act of 1934, f 1935 or Sectio	Number: Expires: Estimated a burden hou response	Expires: January 31 Expires: 2005 Estimated average burden hours per	
1(b).						-					
1. Name and Address of Reporting Person * 2. Issues CANNON JAMES ANTHONY Symbol				PHARM ONCOLOGY INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mor				Date of Earliest Transaction Month/Day/Year) 2/29/2018				X_Director10% Owner Officer (give titleOther (specify below) below)			
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BOSTON, M									More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or D (D) (Instr. 3,	ispose	d of 5) Price	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 Indirect Beneficial Ownership (Instr. 4)	
Common Stock	12/29/2018			F	4,315 (1)	D	\$ 1.66	383,050	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.

 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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) o Disposed of (D (Instr. 3, 4, and 5)	Expiration D (Month/Day, or	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)	\$ 1.87	12/31/2018		А	126,700	<u>(2)</u>	12/31/2028	Common Stock	126,700	

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Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
CANNON JAMES ANTHONY C/O ZIOPHARM ONCOLOGY, INC. ONE FIRST AVENUE, PARRIS BLDO BOSTON, MA 02129	G 34	Х					
Signatures							
/s/ Kevin Lafond, Attorney-in-Fact	01/02/	2019					
**Signature of Reporting Person	Date	e					

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) 126,700 options vest on 12/31/2019.

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.