FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response.								

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

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

Name and Address of Reporting Person* PACE GARY W					2. Issuer Name and Ticker or Trading Symbol Cardiff Oncology, Inc. [CRDF]									k all app Direc	licable) tor	ng Person(s) to I		Owner			
		COLOGY, INC.	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/18/2021									Office	eer (give title w)		Other (s	specify			
11055 FLINTKOTE AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	EGO CA	A 9	2121											1 '	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Z	Zip)																		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				y/Year) Execution		cution I	ution Date,		3. 4. Securitie Disposed Code (Instr. 8)					5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	unt (A) (C)		rice	Transa	ction(s) 3 and 4)			(IIISU. 4)		
Common Stock 03/2					2021			P		1,000	A	. 1	S10.58	452,811			D				
Common Stock 03/18/2				2021		P		2,000	A \$1		10.54	4 454,811			D						
	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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		ion Date,	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	osed) r. 3, 4	Expiration		ate Exercisable and ration Date tth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ov Fo Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
Fundamentia					Code V (A)		(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber							

Explanation of Responses:

Remarks:

/s/ Gary Pace

03/19/2021

** Signature of Reporting Person Date

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.