SEC For	rm 4																			
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549												SION		OMB	APPRO	VAL	
Section 16. Form 4 or Form 5 obligations may continue. See					NT OF CHANGES IN BENEFICIAL OWNE I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									RS	HIP	Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person [*] Levine James E.					2. Issuer Name and Ticker or Trading Symbol Cardiff Oncology, Inc. [CRDF]									(Che	ck all applic Director	able) r	,		vner	
(Last) (First) (Middle) C/O CARDIFF ONCOLOGY, INC. 11055 FLITKOTE AVE					3. Date of Earliest Transaction (Month/Day/Year) 07/12/2021									- X Officer (give title Other (specify below) below) Chief Financial Officer					specify	
(Street) SAN DIEGO CA			92121		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)					ative Securities Acquired, Disposed of, or Benefic										Ownod					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ction 2A. Deemed Execution I			d Date,	3. Transa Code (I	ction	4. Securit	ties Acquired (A) I Of (D) (Instr. 3, 4		or	5. Amoun Securities Beneficia Owned Fo Reported	s Ily ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pr	ice	Transacti (Instr. 3 a	on(s) 1d 4)			(Instr. 4)	
			Table II - D (,		osed of, convertit				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Co	Transaction Code (Instr				6. Date Exercisable Expiration Date (Month/Day/Year)		e	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	de	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amou or Numb of Sh	ber		(Instr. 4)				
Common Stock	\$6.55	07/12/2021		I	4		390,000		(1)		07/12/2031	Stock Options	390,	000	\$0	390,00	00	D		

Explanation of Responses:

1. 97,500 vest on 7/12/2022. 8,125 vest monthly for 36 months beginning on 8/12/2022 through 7/12/2025.

Remarks:

/s/ James Levine

07/12/2021 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.