FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* Levine James E.			2. Date of E Requiring S (Month/Day 07/12/202	tatement /Year)						
(Last) (First) (Middle) C/O CARDIFF ONCOLOGY, INC. 11055 FLITKOTE AVE				4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give	g Person(s) to 10% Owner Other (specify		If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing			
(Street) SAN DIEGO (City)	CA (State)	92121 (Zip)	-		X title below) Chief Financia	below)		(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. I)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
Exp (Mo		2. Date Exerc Expiration Day/\ (Month/Day/\	ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversi or Exerci Price of	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivativ Security	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

<u>/s/ James Levine</u>

07/12/2021

** 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 5 (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.