Edgar Filing: Cyclacel Pharmaceuticals, Inc. - Form 4

Cyclacel Pha Form 4 July 11, 200	armaceuticals, Ind	с.									
FORM									PPROVAL		
	UNITED	STATES		RITIES A ashington			N OMB Number:	3235-0287			
Check th if no lon	ger				Expires:	January 31, 2005					
subject to Section Form 4 c	6. SIAIE N	AENT OI	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated burden hou response	l average ours per		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the l	Public U	Jtility Ho	lding Cor		nge Act of 1934, t of 1935 or Section 1940	·			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Chiao Judy			2. Issuer Name and Ticker or Trading Symbol			c	5. Relationship of Reporting Person(s) to Issuer				
			Cyclacel Pharmaceuticals, Inc. [CYCC]				(Check all applicable)				
(Last)	(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify						
150 JOHN F. KENNEDY PARKWAY, SUITE 100			06/14/2006			below) V.P., C	below) below) V.P., Clin. Dev. & Reg. Aff.				
		4. If Amendment, Date Original Filed(Month/Day/Year)			ıl	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
SHORT HI	LLS, NJ 07078						Person	More than One K	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)		ction Date 2A. Deemed ay/Year) Execution Date, if any (Month/Day/Year)				Securities Beneficially Owned Following Reported	-	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(
Reminder: Rep	port on a separate line	e for each cl	ass of sec	urities bene	-	-	-				
					inforn requi	nation con red to resp ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	GEC 1474 (9-02)		
	Tab					posed of, or convertible	Beneficially Owned securities)	1			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionDerivative	Expiration Date	Underlying Securities

Edgar Filing: Cyclacel Pharmaceuticals, Inc. - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Option	\$ 6.4	06/14/2006		А	48,967		<u>(1)</u>	06/14/2016	Common Stock	48,967

Reporting Owners

Reporting Owner Name / Address	Relationships					
I	Director	10% Owner	Officer	Other		
Chiao Judy 150 JOHN F. KENNEDY PARKWAY, SUITE 100 SHORT HILLS, NJ 07078			V.P., Clin. Dev. & Reg. Aff.			
Signatures						

Signatures

/s/ Judy Chiao 07/11/2006

<u>**</u>Signature of Reporting Person

Date

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) 2/3 of options vest immediately and 1/3 vest rateably over the following 12 months

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.