Edgar Filing: UPRICHARD DAVID C - Form 4

UPRICHAR Form 4 March 31, 20										
FORM										PPROVAL
FUNI	4 UNITED	STATES		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-0287
Check thi	or			U U					Expires:	January 31,
Form 4 or						BENEFICIAL OWNERSHIP OF				2005 average urs per . 0.5
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17(a) of the I	Public U		ding Co	mpan	y Act	nge Act of 1934, of 1935 or Secti 940		
(Print or Type R	Responses)									
1. Name and Address of Reporting Person <u></u> UPRICHARD DAVID C			2. Issuer Name and Ticker or Trading Symbol			ng	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)				_X_ Director10% Owner Officer (give titleOther (specify below) below)			
200 CONNE 1500	ELL DRIVE, SU	ITE	03/29/2	2010				below)	below)	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BERKELEY	HEIGHTS, NJ	07922							More than One R	
(City)	(State)	(Zip)	Tal	ble I - Non-	Derivative	Secur	ities A	cquired, Disposed	of, or Beneficia	lly Owned
	2. Transaction Date (Month/Day/Year)		Date, if	(Instr. 8)	Disposed (Instr. 3,	(A) on of (D) 4 and 5 (A) or) 5)	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)
Reminder: Ren	ort on a separate line	for each cl	nes of sec	Code V		(D)	Price	or indirectly		
Kennider, Kep	or on a separate line		435 01 500	Jurnes belle	Perso inforr requi	ons wi natior red to ays a	ho res n cont respo	pond to the colle ained in this forn and unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)
	Tab			curities Acc ls, warrants				Beneficially Owner securities)	d	
1 TH F 2	2 T	t ¹ D - t -	24 D-	d	4	5 N	r 1	of C Data Errori		7 Title and Ameri

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities]

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)	(Month/Day,	/Year)	(Instr. 3 and	4) 9
				Code V	(A) (D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option	\$ 2.38	03/29/2010		А	50,000	<u>(1)</u>	03/29/2020	Common Stock	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
UPRICHARD DAVID C 200 CONNELL DRIVE, SUITE 1500 BERKELEY HEIGHTS, NJ 07922	Х					
Signatures						

/s/ David C. U?Prichard	03/30/2010			
<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) These options are exercisable over a four-year period with one-fourth (1/4) of the options vesting on the first anniversary of the grant date and the balance vesting ratably on a monthly basis over the 36 months following thereafter.

(2) The options were granted to Mr. U'Prichard for his services as the chairman of the board of directors of Cyclacel Pharmaceuticals, Inc.

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.

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