Edgar Filing: Cyclacel Pharmaceuticals, Inc. - Form 4

Cyclacel Pharmaceuticals, Inc. Form 4 September 11, 2014

September	11, 2014											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							лт	OMB APPROVAL				
							IN	OMB Number:	3235	-0287		
Check t if no lor subject Section Form 4	MENT OF	CHANGES IN BENEFICIAL OWNERSHI SECURITIES					NERSHIP O	F				
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> BARKER SAM L			2. Issuer Name and Ticker or Trading Symbol					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_ Director 10% Owner Officer (give title Other (specify				
	LACEL CEUTICALS, IN LL DRIVE, SUIT	C., 200	09/10/2	2014				below)		below)		
	(Street)	reet) 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				
BERKELE	EY HEIGHTS, NJ	07922								re than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securitie	es Acqu	uired, Disposed	of,	or Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ction Date 2A. Deemed ay/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Se Bo O Fo Ro Ti	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 2 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Pr	rice	nstr. 3 and 4)				
Reminder: Re	port on a separate line	e for each clas	ss of sec	urities bene	•		•	•				
					infor	mation co	ontain	and to the colle ned in this forr d unless the fo	m ai		SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

number.

displays a currently valid OMB control

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option	\$ 3.26	09/10/2014		А	9,000	09/10/2015	09/10/2024	Common Stock	9,000	

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Reporting Owners

Reporting Owner Name / AddressRelationsityDirector10% OwnerOfficerOtherBARKER SAM L
C/O CYCLACEL PHARMACEUTICALS INC
SOO CONNELLL DRIVE, SUITE 1500
BERKELEY HEIGHTS, NJ 07922XSince Since S

<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 were granted to Dr. Barker for his services as a member 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.