Edgar Filing: Cyclacel Pharmaceuticals, Inc. - Form 4

Cyclacel Pharmaceuticals, Inc. Form 4 September 04, 2008

Common

Stock

09/02/2008

September 0	4, 2008										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Statement of the section 16.									3235-0287 January 31, 2005 I average burs per		
			2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. 1 (M			3. Date of (Month/D	3. Date of Earliest Transaction (Month/Day/Year) 09/02/2008				Director X 10% Owner Officer (give title Other (specify below)			
				ndment, Da nth/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 Person 			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Ac	quired, Disposed	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if		Transaction(A) or Disposed of Code (D)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)			
Common Stock	09/02/2008			S	5,700	D	\$ 1.68	2,996,924	I	By Subsidiary	
Common Stock	09/02/2008			S	7,200	D	\$ 1.59	2,989,724	Ι	By Subsidiary	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Р

5,700 A ^{\$} 2,995,424

By

(1)

Subsidiary

Ι

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transactio Code	5. onNumber of	6. Date Exerce Expiration Date (Month/Day/	ate	7. Titl Amou Under		8. Price of Derivative Security	9. Nu Deriv Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative Security				Securities Acquired			(Instr.	. 3 and 4)		Owne Follo
	~~~~,				(A) or						Repo
					Disposed of (D)						Trans (Instr
					(Instr. 3,						(III)
					4, and 5)						
						Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MORGAN STANLEY 1585 BROADWAY NEW YORK, NY 10036		Х					
<u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u>							

# Signatures

/s/ Dennine Bullard, By: Morgan Stanley, By: Dennine Bullard, Authorized Signatory

**Signature of Reporting Person

# **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).

The reported securities are held directly by certain funds (each, a "Fund" and collectively, the "Funds") managed by indirect subsidiary entities of the reporting person. FrontPoint Partners LLC ("FPP"), an indirect wholly owned subsidiary of the reporting person is the

parent company of each entity that is the investment manager of one or more of the Funds. This form is filed without prejudice to the (1) reporting person's position that none of the Funds nor FPP or any of its subsidiaries, nor the reporting person, individually or in aggregate, are required to file beneficial ownership reports under Section 16(a) of the a Securities Exchange Act of 1934, and should not be construed or interpreted as a concession or admission that such reports are required.

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.

09/03/2008

Date

(9-02)