FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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Check this box if no longer subject it
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* UPRICHARD DAVID C					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
UPRIC	HAKD L	DAVID C									,		,		X Direct	or		10% Ov	vner	
(Last)	`	rst) (IVE, SUITE 150	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/22/2013								Office below	r (give title)		Other (s below)	specify			
(Street) BERKEI HEIGHT	N	J (07922		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lin	Individual or Joint/Group Filing (Check Applicable lee) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(Si	tate)	(Zip)												Perso	n		·	·	
		Tab	le I - Non-	Deriva	tive	Sec	uritie	s Ac	quire	d, Di	sposed	of,	or Be	neficia	lly Owne	d				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Date		ar) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.					Benefic Owned	es ially Following	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
											Amoui	nt	t (A) or Pr		Reporte Transac (Instr. 3	tion(s)				
		Т	able II - D (e								posed o				y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	Co	Transactio Code (Inst				6. Date Exercisable at Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		j Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)	(D)	Date Exercis	able	Expiratior Date	Tit	tle	Amount or Number of Shares						
Option	\$2.99	05/22/2013			A		7,142		(1)		05/22/202	3 Co	ommon	7,142	\$0 ⁽²⁾	7,142	2	D		

Explanation of Responses:

- 1. These options are exercisable over a four-year period with 1/48 of the options granted vesting on a monthly basis.
- 2. These options were granted to Mr. U'Prichard for his services as the chairman of the board of directors of Cyclacel Pharmaceuticals, Inc.

05/23/2013 /s/ David C. U'Prichard

** Signature of Reporting Person Date

Stock

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 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).

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.