FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

ington, D.C. 20549	OMB APPROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287	
OTHER OF OTHER DETERMINE OF THE COMMENTAL OF THE COMMENT OF THE CO	Estimated average burden		
	hours per response:	0.5	

Check this box if no longer subject to 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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Hradsky Gregory T.</u>					2. Issuer Name and Ticker or Trading Symbol <u>Cyclacel Pharmaceuticals, Inc.</u> [CYCC]										cable) or	Person(s) to Is	ner		
(Last) (First) (Middle) C/O CYCLACEL PHARMACEUTICALS, INC. 200 CONNELL DRIVE, SUITE 1500				IC.	3. Date of Earliest Transaction (Month/Day/Year) 05/22/2014										Officer below)	(give title	Other (below)	specify	
(Street) BERKELEY HEIGHTS NJ 07922					4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																
		Tab	le I - Non	-Deriva	ative	Sec	uritie	s Ac	qui	ired, Di	sposed	of, or	Ben	eficial	ly Owned	<u>. t</u>			
Date			2. Transa Date (Month/D		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		·, i	Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4		Benefici Owned F	es F ally (I Following (I	. Ownership form: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									9	Code V	Amoun	i ((A) or (D)		Reported Transact (Instr. 3	tion(s)		(Instr. 4)	
		Т	able II - I (posed o				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 Date, if any (Month/Day/Year)		4. Transactio Code (Inst				Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title		Amount or Number of Shares					
Option	\$3.09	05/22/2014			A		9,000		05/2	22/2015	05/22/2024	Comn		9,000	\$0 ⁽¹⁾	9,000	D		

Explanation of Responses:

1. These options were granted to Mr. Hradsky for his services as a member of the board of directors of Cyclacel Pharmaceuticals, Inc.

05/23/2014 /s/ Gregory T. Hradsky

** Signature of Reporting Person Date

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.