Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN BEN	NEFICIAL	OWNERS	HIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* HENNEY CHRISTOPHER S				2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]							(Che	eck all applic	able) r	g Pers	son(s) to Issi 10% Ow	ner		
(Last) (First) (Middle) C/O CYCLACEL PHARMACEUTICALS, INC. 200 CONNELL DRIVE, SUITE 1500			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2015									Officer (give title Other (specify below) below)						
(Street) BERKEI HEIGHT	N	J	07922	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)			Line	ndividual or Joint/Group Filing (Check Applicable c) X Form filed by One Reporting Person Form filed by More than One Reporting Person				1					
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			Transaction te onth/Day/\	Execution Date		Date,	Code (Instr. 5)						es Formally (D) (Following (I) (I		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code V		Amount	(A (D) or)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Code	saction (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	· v	(A)		Date Exercisab		Expiration Date	Title	0 0	amount or lumber of shares					
Option	\$0.8	05/22/2015		A		15,000		05/22/201	6 0	5/22/2025	Comm	on 1	5,000	\$0 ⁽¹⁾	15,000)	D	

Explanation of Responses:

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

/s/ Christopher S. Henney

05/26/2015

** 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.