FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the

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* McBarron Paul					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]								(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 200 CONNELL DRIVE, SUITE 1500					3. Date of Earliest Transaction (Month/Day/Year) 02/18/2015									Officer (give title below) E.V.P.,Finance,C			Other (specify below)		
(Street) BERKEI HEIGHT (City)	rs ^N	-	4. If Amendment, Date of Original Filed (Month/Day/Year) (Zip)								Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tab	le I - Non-	Derivati	ve Se	curitie	s Ac	quired,	Disp	osed o	f, or B	ene	ficiall	y Owned					
Date				2. Transacti Date (Month/Day	Exec (ay/Year) if any		ed I Date, ay/Yeai	3. 4. Securi Transaction Disposed Code (Instr. 5)						5. Amou Securitie Benefici Owned F	es ally Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	ount (A) or (D)		Price	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		3A. Deemed Execution Date, if any (Month/Day/Year)	Cod	saction e (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	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)	
				Cod	e V	(A)	(D)	Date Exercisabl		expiration pate	Title	Or No	umber						
Option	\$0.86	02/18/2015		А		53.095		(1)	0	2/18/2025	Commo	n 5	3.095	\$0 ⁽²⁾	53,09	5	D		

Explanation of Responses:

- 1. These securities are exercisable over a three-year period, with 1/36 of the options granted vesting on a monthly basis.
- 2. These securities were granted to Mr. McBarron under the Issuer's Amended and Restated 2006 Equity Incentive Plan as part of the Issuer's annual equity compensation to executive officers.

/s/ Paul McBarron

02/20/2015

** 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.