FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
1	hours por rosponso:	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>Sosnowski Robert Edward</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Cyclacel Pharmaceuticals, Inc. [ CYCC ]										elationship of eck all applic Directo	able) r	g Pers	10% Ov	vner	
(Last)	,	irst) IVE, SUITE 150	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/04/2010									below)	r (give title ) VP, Sales & M		Other (s below) rketing	респу	
(Street) BERKEI HEIGHT	N	J	07922		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tal	ole I - Nor	n-Deri	vativ	e Se	curi	ties Ac	quir	ed, D	isp	osed o	f, or	Bene	eficially	Owned				
1. Title of Security (Instr. 3)  2. Trans Date (Month/				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			(A) or 3, 4 and	Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct   I · Indirect   I str. 4)   (	7. Nature of Indirect Beneficial Ownership		
								Co	ode	′	Amount	(A) or (D) Pi		Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock, \$0.001 par value per share 05/04/				04/201	2010		]	М		10,000		A	\$0.44	10,	10,000		D			
Common Stock, \$0.001 par value per share 05/04/			04/201	/2010		S	S <sup>(1)</sup>		10,000		D	\$2.5	5 0			D				
			Table II -									sed of, onvertib				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. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year			of S Und Der		7. Title and Amou of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable		Expiration Date	Title		Amount or Number of Shares					
Option	\$0.44	05/04/2010			M			10,000	11/18/	3/2009 <sup>(1)</sup>	$\left  \begin{array}{c} 1 \\ 1 \end{array} \right $	1/18/2018	Com		10,000	<b>\$0</b> <sup>(2)</sup>	90,000	(3)	D	

## **Explanation of Responses:**

- 1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 plan adopted by Mr. Sosnowski.
- 2. These securities were issued as part of the Issuer's annual equity compensation to executive officers on November 18, 2008.
- 3. 23,333 of these options vested on November 18, 2009, the first anniversary of the grant date, and the balance of the options vest ratably on a monthly basis over the following 24 months.

/s/ Robert E. Sosnowski

05/05/2010

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.