FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.O.	20070

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	//B APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Pombotic Spire Coorge					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Rombotis Spiro George				-									X	Directo	or		10% Ov	ner		
(Last)	•	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/21/2023								X	below)	(give title President	and	Other (s below)	pecify	
C/O CYCLACEL PHARMACEUTICALS, INC.,															President	and	CEO			
200 CONNELL DRIVE, SUITE 1500					4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person					
BERKEI HEIGHT	N	J (07922												Form f Persor		e thar	n One Repo	ting	
,					- Rι	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da					Execution Date			3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 5)				4 and Securitie Benefici		es For ially (D) Following (I) (Form (D) o	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	е	Transac (Instr. 3	ion(s)			(Instr. 4)	
Common Stock ⁽¹⁾ 12/21				1/2023	3			P		6,070	6,070 A \$		315	68,658			D			
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 (Security Security S			Date,		4. 5. Number of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amour or Number of Shares	er						
Warrants (right to buy)	\$3.19	12/21/2023			P		6,070		12/21/202	13 1	2/21/2030	Common Stock	6,070	0	\$0 ⁽²⁾	6,070		D		

Explanation of Responses:

- 1. The Reporting Person purchased unregistered shares of the Issuer's common stock in a private placement, pursuant to a Securities Purchase Agreement between the Reporting Person and the Issuer.
- $2. \ Each \ share \ of \ common \ stock \ was \ purchased \ with \ an \ accompanying \ warrant \ at \ an \ aggregate \ purchase \ price \ of \$3.315 \ per \ share \ and \ accompanying \ warrant.$

/s/ Spiro Rombotis

12/26/2023

** 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.