FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Womelsdorf Dr John Francis							2. Issuer Name and Ticker or Trading Symbol <u>Cyclacel Pharmaceuticals</u> , <u>Inc.</u> [CYCC]									all app Direc	licable)	Person(s) to Is		
(Last) (First) (Middle) 200 CONNELL DRIVE SUITE 1500							3. Date of Earliest Transaction (Month/Day/Year) 03/18/2008									belov				
(Street) BERKELEY HEIGHTS NJ 07922 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										. Indivi					
	`	-		n-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed o	f, o	r Ben	eficia	ally C) Wne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)) or 5.4 and 5) S B		ecurities eneficially wned Following		ership Direct ndirect : 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	- 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, par value \$0.001 per share 03/18/2							2008		P		2,900		A	\$2.93		5,000		Γ)	
Common Stock, par value \$0.001 per share 03/18/2							2008				2,100 A \$2		\$2.8	319	2,100		Γ)		
		Та									sed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		I. Transaction Code (Instr. 3)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/E	on Dat	ear)	or		ı			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 Exercisa		Expiration Date	Title		ares							

Explanation of Responses:

/s/ Dr. John Francis Womelsdorf

03/19/2008

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).