FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP				
	STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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* <u>UPRICHARD DAVID C</u>					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]									heck all	ship of Reportii applicable) rector	g Person(s) to Iss 10% Ow				
(Last) 150 JOH	`	irst) (Middle) Y, SUITE	100		3. Date of Earliest Transaction (Month/Day/Year) 09/06/2006										ficer (give title low)			ner (specify ow)	
(Street) SHORT	HILLS N)7078 Zip)		4. If Amendment, D				e of Original Filed (Month/Day/Year)						ne) X F	orm filed by On	nt/Group Filing (Check Applicable d by One Reporting Person d by More than One Reporting			
		Tabl	e I - Non	-Deriv	ative	Sec	uritie	s Acc	quired,	Dis	osed o	f, or	Bene	eficia	lly Ow	ned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		Code (Transaction Disposed Of (D Code (Instr. 5)			es Acquired (A) or Of (D) (Instr. 3, 4 and		nd Sec Ber Ow	mount of urities leficially ned Following lorted	6. Owners Form: Dire (D) or Indir (I) (Instr. 4)	ct ect	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) or (D)		Price	Tra	nsaction(s) tr. 3 and 4)			(Instr. 4)			
Common Stock 09				09/0	6/2006				P		250 A		\$4.	.9	18,776	D				
		Та	ıble II - D (e								sed of, onvertib				/ Owne	ed				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		Date,	Transaction Code (Instr. 8)		of		6. Date Ex Expiration (Month/Da)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	of Sha							

Explanation of Responses:

/s/ David C. UPrichard

09/08/2006

** 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.