The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL OMB 3235-Number: 0076 Estimated average burden hours per response: 4.00

1. Issuer's Identity

| CIK (Filer ID Number) | Previous Names | None | Entity Type |
|--|-------------------|--------------|----------------------------|
| <u>0001130166</u> | | RAPIES INC | X Corporation |
| Name of Issuer | Molecurx, Inc | | Limited Partnership |
| Cyclacel Pharmaceuticals, Inc. | CDR Therape | | Limited Liability Company |
| Jurisdiction of | Xcyte Therap | | General Partnership |
| Incorporation/Organization | | | Business Trust |
| DELAWARE | • .• | | Other (Specify) |
| Year of Incorporation/Orga | anization | | |
| X Over Five Years Ago | | | |
| Within Last Five Years (Specify Ye | ear) | | |
| Yet to Be Formed | | | |
| 2. Principal Place of Business and Cor | ntact Information | | |
| Name of Issuer | | | |
| Cyclacel Pharmaceuticals, Inc. | | | |
| Street Address 1 | | | Street Address 2 |
| 200 Connell Drive, Suite 1500 | | | |
| City State/ | Province/Country | ZIP/PostalC | ode Phone Number of Issuer |
| Berkeley Heights NEW JE | ERSEY | 07922 | 908 517-7330 |
| 3. Related Persons | | | |
| Last Name | First | Name | Middle Name |
| Rombotis | Spiro | | |
| Street Address 1 | | Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive | | |
| City | | ince/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | | 07922 |
| Relationship: X Executive Officer X | Director Promote | r | |
| Clarification of Response (if Necessar | y): | | |
| Last Name | First | Name | Middle Name |
| McBarron | Paul | | |
| Street Address 1 | | Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive | | |
| City | | ince/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | | 07922 |

Relationship: X Executive Officer X Director Promoter

Clarification of Response (if Necessary):

| Last Name | First Name | Middle Name |
|--|---|-------------------------|
| Chiao | Judy | |
| Street Address 1 c/o Cyclacel Pharmaceuticals, Inc. | Street Address 2 200 Connell Drive, Suite 1500 | |
| City | State/Province/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 |
| Relationship: X Executive Officer | | |
| Clarification of Response (if Necessa | ury): | |
| | | |
| Last Name | First Name | Middle Name |
| Henney | Christopher | S. |
| Street Address 1 | Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. City | 200 Connell Drive, Suite 1500 State/Province/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 |
| Relationship: Executive Officer Σ | | 07522 |
| - | | |
| Clarification of Response (if Necessa | ury): | |
| Last Name | First Name | Middle Name |
| Bacopoulos | Nicholas | |
| Street Address 1 | Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | |
| City | State/Province/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 |
| Relationship: Executive Officer <i>X</i> | Director Promoter | |
| Clarification of Response (if Necessa | rry): | |
| Last Name | First Name | Middle Name |
| Banham | John | |
| Street Address 1 | Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | |
| City Berkeley Heights | State/Province/Country NEW JERSEY | ZIP/PostalCode 07922 |
| Relationship: Executive Officer Σ | | 0/922 |
| - | | |
| Clarification of Response (if Necessa | ıry): | |
| Last Name | First Name | Middle Name |
| Spiegelman | Daniel | К. |
| Street Address 1 | Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | |
| City Borkelov Heights | State/Province/Country NEW JERSEY | ZIP/PostalCode 07922 |
| Berkeley Heights Relationship: Executive Officer <i>Σ</i> | | 07522 |
| Clarification of Response (if Necessa | | |
| | | |
| Last Name U'Prichard | First Name David | Middle Name |
| Street Address 1 | David Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | |
| City | State/Province/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 |
| | | |

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

| Last Name | First Name | Middle Name |
|--|-------------------------------|----------------|
| Sems | Lloyd | |
| Street Address 1 | Street Address 2 | |
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | |
| City | State/Province/Country | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 |
| Relationship: Executive Officer X | X Director Promoter | |
| Clarification of Response (if Necessa | ıry): | |
| Last Name | First Name | Middle Name |
| Hradsky | Gregory | |
| Street Address 1 | Street Address 2 | |

| Street Address 1 | Sufet Aduless 2 | | |
|--|-------------------------------|-------|----------------|
| c/o Cyclacel Pharmaceuticals, Inc. | 200 Connell Drive, Suite 1500 | | |
| City | State/Province/Country | | ZIP/PostalCode |
| Berkeley Heights | NEW JERSEY | 07922 | |
| Relationship: Executive Officer 3 | X Director Promoter | | |

Clarification of Response (if Necessary):

4. Industry Group

| Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking Pooled Investment Fund | | Health Care X Biotechnology Health Insurance Hospitals & Physicians Pharmaceuticals Other Health Care | Retailing Restaurants Technology Computers Telecommunications Other Technology Travel |
|---|-----------------------------|--|---|
| Is the issuer regis an investment con the Investment Co Act of 1940? Yes Other Paplying & | npany under ompany No | Manufacturing Real Estate Commercial Construction REITS & Finance | Airlines & Airports Lodging & Conventions Tourism & Travel Services |
| Business Services Energy Coal Mining | Financial Services | Residential Other Real Estate | Other Travel Other |

5. Issuer Size

Oil & Gas

Other Energy

Electric Utilities

Energy Conservation Environmental Services

| Revenue Range | OR | Aggregate Net Asset Value Range |
|---------------------------|----|---------------------------------|
| No Revenues | | No Aggregate Net Asset Value |
| \$1 - \$1,000,000 | | \$1 - \$5,000,000 |
| \$1,000,001 - \$5,000,000 | | \$5,000,001 - \$25,000,000 |

| \$5,000,001 - \$25,000,000 | \$25,000,001 - \$50 | 0,000,000 |
|--|------------------------------|---|
| \$25,000,001 - \$100,000,000 | \$50,000,001 - \$1 | 00,000,000 |
| Over \$100,000,000 | Over \$100,000,00 | 00 |
| X Decline to Disclose | Decline to Disclo | se |
| Not Applicable | Not Applicable | |
| 6. Federal Exemption(s) and Exclusion(s) Claim | ed (select all that a | pply) |
| Rule 504(b)(1) (not (i), (ii) or (iii)) | Rule 505 | |
| Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) | X Rule 506 Securities Act | Section $4(5)$ |
| Rule 504 (b)(1)(iii) | | ompany Act Section 3(c) |
| | Section 3(c) | 1) Section 3(c)(9) |
| | Section 3(c)(2 | 2) Section 3(c)(10) |
| | Section 3(c) | 3) Section 3(c)(11) |
| | Section 3(c)(4 | 4) Section 3(c)(12) |
| | Section 3(c)(5 | 5) Section 3(c)(13) |
| | Section 3(c)(6 | 5) Section 3(c)(14) |
| | Section 3(c)(7 |) |
| 7. Type of Filing | | |
| X New Notice Date of First Sale 2012-03-22 Amendment | First Sale Yet to (| Dccur |
| 8. Duration of Offering | | |
| Does the Issuer intend this offering to last more | than one year? | Yes X No |
| 9. Type(s) of Securities Offered (select all that a | pply) | |
| X Equity | | Pooled Investment Fund Interests |
| Debt | | Tenant-in-Common Securities |
| X Option, Warrant or Other Right to Acquire A Security to be Acquired Upon Exercise of Op | 5 | Mineral Property Securities |
| Other Right to Acquire Security | | Other (describe) |
| 10. Business Combination Transaction | | |
| Is this offering being made in connection with a a merger, acquisition or exchange offer? | business combinat | ion transaction, such as Yes X No |
| Clarification of Response (if Necessary): | | |
| 11. Minimum Investment | | |
| Minimum investment accepted from any outside | e investor \$0 USD | |
| 12. Sales Compensation | | |
| Recipient | Recipi | ent CRD Number X None |
| (Associated) Broker or Dealer X None | (Assoc | iated) Broker or Dealer CRD Number X None |
| Street Address 1 | Ctata /D | Street Address 2 |
| City | State/P | rovince/Country |

State(s) of Solicitation (select all that apply) Check "All States" or check individual States

All States Foreign/non-US

ZIP/Postal Code

13. Offering and Sales Amounts

Total Offering Amount\$3,036,000 USD orIndefiniteTotal Amount Sold\$3,036,000 USDTotal Remaining to be Sold\$0 USD orIndefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

| Sales Commissions | \$0 USD | Estimate |
|-------------------|---------|----------|
| Finders' Fees | \$0 USD | Estimate |

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

| 7 | | |
|---|--|--|

| Issuer | Signature | Name of Signer | Title | Date |
|--------------------------------|-------------------|----------------|--------------------------|------------|
| Cyclacel Pharmaceuticals, Inc. | /s/ Paul McBarron | Paul McBarron | CFO, COO and EVP-Finance | 2012-04-30 |

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.