FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028

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

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

	Estimated avera	•	0.5				
nship of Reporting Person(s) to Issuer applicable)							
Director		10% Owner					
Officer (give	e title	Other (specify below)					

1. Name and Address of Reporting Person* McBarron Paul					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]							(Ch	eck all application	able) r	10% Owner		ner	
(Last) (First) (Middle) 200 CONNELL DRIVE, SUITE 1500					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2019								Officer (give title Other (specify below) E. VP, Fin, CFO and COO					
	Street) BERKELEY HEIGHTS NJ 07922				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)															
		Та	ble I - Nor			_				÷				Owned				
Date			2. Trans Date (Month)		action 2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.				Beneficia	es Form ally (D) of Following (I) (In		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	,	Amount	(A) o (D)	r Price	Transacti (Instr. 3 a	ion(s)			
	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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year)			ransa Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)			nd 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares		(Instr. 4)			
Option	\$0.71	01/04/2019			A		270,079		(1)	01/	/04/2029	Common Stock	270,079	\$0 ⁽²⁾	270,07	9	D	
Option	\$1.74	01/03/2019			A		13,021		(3)	12/	/29/2027	Common Stock	13,021	\$0 ⁽³⁾	13,021	1	D	
Option	\$1.56	01/03/2019			A		11,980		(4)	02/	/22/2028	Common Stock	11,980	\$0 ⁽⁴⁾	11,980		D	

Explanation of Responses:

- 1. These securities are exercisable over a three-year period, with 1/36 of the options granted vesting on a monthly basis.
- 2. These securities were granted as part of the Issuer's annual compensation review to executive officers.
- 3. On December 29, 2017, Paul McBarron was granted an option to purchase certain shares of common stock, which option shall vest according to the satisfaction of performance criteria. Certain performance criteria were confirmed to have been met on January 3, 2019, resulting in the vesting of the option as to 13,021 shares.
- 4. On February 22, 2018, Paul McBarron was granted an option to purchase certain shares of common stock, which option shall vest according to the satisfaction of performance criteria. Certain performance criteria were confirmed to have been met on January 3, 2019, resulting in the vesting of the option as to 11,980 shares.

01/07/2019 /s/ Paul McBarron

** 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.