CYTOKINETICS INC

Form 4 May 20, 2005

FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations may continue.

See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

CYTOKINETICS INC [CYTK]

(Print or Type Responses)

1. Name and Address of Reporting Person * **HOMCY CHARLES J**

(First) (Last)

280 EAST GRAND AVENUE

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

05/19/2005

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Issuer Symbol

(Check all applicable)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

X_ Director 10% Owner Other (specify Officer (give title below)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SOUTH SAN FRANCISCO, CA 94080

(City)

Security

(Instr. 3)

1.Title of 2. Transaction Date 2A. Deemed

(Month/Day/Year) Execution Date, if

(State)

(Zip)

(Month/Day/Year)

3. Code (Instr. 8)

4. Securities TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

or

5. Amount of Securities Beneficially Owned Following Reported Transaction(s) 6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

(Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

Number Transaction Derivative Code Securities

Date Exercisable and **Expiration Date**

(Month/Day/Year)

7. Title and Am Underlying Seco (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	A on N
Non-Qualified Stock Option (right to buy)	\$ 5.55	05/19/2005		A	7,500	05/19/2005	05/19/2015	Common Stock	,
Non-Qualified Stock Option (right to buy)	\$ 1.2					03/19/2003(1)	03/19/2013	Common Stock	3
Non-Qualified Stock Option (right to buy)	\$ 1.2					05/21/2003(2)	05/21/2013	Common Stock	1

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
HOMCY CHARLES J 280 EAST GRAND AVENUE SOUTH SAN FRANCISCO, CA 94080	X					

Signatures

By: James H. Sabry For: Charles Homcy 05/20/2005

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) This option is immediately exercisable upon grant and shall vest as to 833 shares on 03/13/03 and the balance of 29,167 divided into equal monthly installments thereafter such that the option shall be 100% vested on 02/13/06.
- (2) This option is immediately exercisable upon grant and shall vest as to 521 shares on 04/03/03 and the balance of 11,979 divided into equal monthly installments thereafter such that the option shall be 100% vested on 03/03/05.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2