Edgar Filing: CYTOKINETICS INC - Form 4

CYTOKINI	ETICS INC										
Form 4											
November (06, 2009										
FORM		OMB APPROVAL									
	UNITED	STATES		RITIES A shington		N OMB Number:	3235-0287				
Check the check	nger				Expires:	January 31, 2005					
subject		MENT O	F CHAI			Estimated					
Section 16. SECURITIES								burden hou response	irs per		
Form 4 Form 5	^{n 4} or ^{n 5} Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								0.5		
obligatio	-						t of 1935 or Secti	on			
may cor	itinue.			•	•	ny Act of 1		UII			
<i>See</i> Inst 1(b).	ruction	50(II)	of the f	livestilleli	i Compai	IY ACT OF I	1940				
1(0).											
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person *	2 Issu	er Name an	d Ticker or	Trading	5. Relationship	of Reporting Per	son(s) to		
GAGE L P	· · · · -	2. Issuer Name and Ticker or Trading Symbol				Issuer	1 8				
	CYTOKINETICS INC [CYTK]										
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Check all applicable)				
(Last) (Flist) (Middle)			(Month/Day/Year)			_X_ Director10% Owner					
280 EAST	GRAND AVENU	JE	11/05/2009			Officer (give title Other (specify					
			110012009				below) below)				
(Street)			4. If Amendment, Date Original			1	6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)				Applicable Line)	One Penerting P	ne Reporting Person		
SOUTH SA	NN						_X_Form filed by One Reporting Person Form filed by More than One Reporting				
	CO, CA 94080						Person				
		(7.)									
(City)	(State)	(Zip)	Tat	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if					Form: Direct	Indirect		
(Instr. 3)		any (Month/Da	av/Year)	Code (Instr. 8)	Disposed (Instr. 3, 4		Beneficially Owned	(D) or Indirect (I)	Ownership		
		(monul/De	ay, rear)	(1150.0)	(1130. 5,	r und 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(Instr. 5 and 4)				
Reminder: Re	port on a separate lin	e for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly.				
							spond to the colle		EC 1474		
							tained in this form		(9-02)		
					•	•	ond unless the fo ntly valid OMB co				
					numb		.,				

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Ar
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Se
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option (right to buy)	\$ 3.33	11/05/2009		A		30,000		12/05/2009 <u>(1)</u>	11/05/2019	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GAGE L PATRICK 280 EAST GRAND AVENUE SOUTH SAN FRANCISCO, CA 94080	Х						
Signatures							
By: Sharon Barbari For: L. Patrick Gage	11/00	5/2009					

**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 shall vest and become exercisable as to 833 shares on 12/05/09 and the balance of 29,167 divided into equal monthly installments thereafter such that the option shall be 100% vested on 11/05/12.

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.