Edgar Filing: CYTOKINETICS INC - Form 4

CYTOKINI Form 4 May 24, 20											
•									OMB A	PPROVA	۹L
FORM	STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					N OMB Number:	3235	-0287		
Check th if no lon subject to Section Form 4 Form 5 obligation	so 16. or Filed pu	rsuant to S	OF CHANGES IN BENEFICIAL OV SECURITIES o Section 16(a) of the Securities Exchance Public Utility Holding Company Act					inge Act of 1934	Estimated burden hou response	ours per	
may con <i>See</i> Inst 1(b).	lunue.			nvestmen	•		. .				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> WIERENGA WENDALL			2. Issuer Name and Ticker or Trading Symbol CYTOKINETICS INC [CYTK]				-	5. Relationship of Reporting Person(s) to Issuer			
							IIKJ	(Check all applicable)			
(Last) (First) (Middle) 280 EAST GRAND AVENUE			 Date of Earliest Transaction (Month/Day/Year) 05/22/2012 			X_ Director 10% Owner Officer (give title Other (specify below)					
			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
SOUTH SA	AN CO, CA 94080							Person	wore than one K	sporting	
(City)	(State)	(Zip)	Tab	ole I - Non-J	Deriva	ntive S	Securities A	Acquired, Disposed	of, or Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al nip		
Reminder: Re	port on a separate lin	e for each clá	ass of sec	urities bene	Pe in re di	erson forma quire	as who re ation con d to resp vs a curre	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

 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)

Edgar Filing: CYTOKINETICS INC - Form 4

(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
Non-Qualified Stock Option (right to buy)	\$ 0.91	05/22/2012		А	25,000	06/22/2012 <u>(1)</u>	05/22/2022	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 1.44					06/18/2011 <u>(2)</u>	05/18/2021	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 1.84					03/09/2011 <u>(3)</u>	02/09/2021	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
WIERENGA WENDALL 280 EAST GRAND AVENUE SOUTH SAN FRANCISCO, CA 94080	Х					
Signatures						
By: Sharon A. Barbari For: Wendell Wierenga		05/23/201	2			
**Signature of Reporting Person		Date				
Evalenction of Deenen						

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 25,000 shares divided into equal monthly installments such that the option shall be 100% vested on May 22, 2013.
- (2) This option shall vest and become exercisable as to 20,000 shares divided into equal monthly installments such that the option shall be 100% vested on May 18, 2012.
- (3) This option shall vest and become exercisable as to 40,000 shares divided into equal monthly installments such that the option shall be 100% vested on February 9, 2014.

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.