| SEC For | m 4 FORM | 4 | UNITE | O STA | TES | S SE | ECU | | ES AI | | | | NG | EC | ОММ | ISSION | | 0145 | 45550 | |
|--|---|--|--|---|--|------|---|---|-----------------|---|-----|---|--|---------------|--|---|--|--|--|--|
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | | | | FINIT OF CHANGES IN BENEFICIAL OWNE Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | | SHIP | OMB | OMB APPROV B Number: 32 mated average burden rs per response: | | 3235-0287 |
| 1. Name and Address of Reporting Person [*] GAGE L PATRICK (Last) (First) (Middle) 280 EAST GRAND AVENUE | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>CYTOKINETICS INC</u> [CYTK] 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2020 | | | | | | | | | | Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner Officer (give title Other (specify below) | | | | | |
| (Street) SOUTH SAN FRANCISCO CA 94080 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. I Lin | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | 'n | |
| (City) | (Si | , | (Zip) | | | 50 | ourit | | | 4 0 | ier | acad a | of o | r Boi | oficial | | 4 | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D) | | | | | ansaction 2 E hth/Day/Year) if | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, | | | d (A) or | A) or 5. Amount | | Form (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Cod | e V | | Amount | | (A) or (D) | Price | Transac | Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock 05/1 | | | | | 5/18/2020 | | | | | | | 3,333 | | Α | \$16.8 | 36 23 | 23,333 | | D | |
| Common Stock 05/18 | | | | | /2020 |) | | | | | | 2,529 | | D | \$22.2 | 22 20 | 2 20,804 | | D | |
| Common Stock | | | | | | | | | | | | | | | | 1, | ,850 | | | by Spouse |
| | | - | | Derivat (e.g., p | | | | | • • | | • | | · | | | / Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | I. Transa Code (1 | | of Der Sec Acq (A) Disj of (I (Ins | 5. Number 6 | | Exerc on Da Day/Y | ate | ble and ') | 7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and | | J Security d 4) Amount | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | | cpiration ate | Title | | or Number of Shares | | | | | |

Explanation of Responses:

\$16.86

Non-Qualified Stock Option

(right to buy)

1. Represents a "net exercise" of an outstanding stock option. The Reporting Person received 804 shares of Common Stock on the net exercise of a stock option to purchase 3,333 shares of Common Stock. The Issuer withheld 2,529 shares of Common Stock underlying the stock option for payment of the exercise price using a stock price on May 18, 2020 of \$22.22.

06/20/2010

By: John Faurescu, Esquire 05/20/2020 For: Patrick L. Gage

\$22.22

0

D

** Signature of Reporting Person Date

3,333

Common Stock

05/20/2020

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).

05/18/2020

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Μ

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.

3,333