## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person <sup>®</sup> BARBARI SHARON SURREY				2. Issuer Name and Ticker or Trading Symbol <u>CYTOKINETICS INC</u> [ CYTK ]							5. Relationship of Reporting Person(s) to Issue Check all applicable) Director 10% Owner			
(Last) 280 EAST GRA	(Last) (First) (Middle) 280 EAST GRAND AVENUE				ate of Earliest Trans 28/2017	action (N	lonth	′Day/Year)	x	Officer (give title below)				
(Street) SOUTH SAN FRANCISCO CA 94080				4. If Amendment, Date of Original Filed (Month/Day/Year)							ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
Date			2. Transactio Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed O and 5)			5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common Stock			02/28/20	017		A		18,750	A	\$0.001	47,640	D		
Common Stock 02/28/2			02/28/20	017		F		7,317	D	\$10.6	40,323	D		
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date,	Transaction Code (Instr. 8)		of		6. Date Exerc Expiration D (Month/Day/	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of Derivative Security (Instr. 5)	derivative	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

## Sharon A. Barbari

\*\* Signature of Reporting Person Date

03/02/2017

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.

OMB APPROVAL