FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 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 [*] HENDERSON JOHN T						2. Issuer Name and Ticker or Trading Symbol <u>CYTOKINETICS INC</u> [CYTK]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2017											er (give title		0% O Other (below)	-		
280 EAST GRAND AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																X Form filed by One Reporting Person					
SOUTH SAN FRANCISCO CA 94080																Form filed by More than One Reporting Person					
(City) (State) (Zip)																					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date				, Transaction Dispo Code (Instr. and 5)				urities Acquired (/ sed Of (D) (Instr. 3			Securi Benefi Owned	ities Fo icially (D d Ind		n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership	
									Cod	,	v	Amoun	t (A (D	or P	rice				r. 4)	(Instr. 4)	
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)	ive Conversion Date y or Exercise (Month/Day/Year) if any			Cod	I. 5. Transaction Number Code (Instr. of B) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ative ities red sed 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	, E	10. Dwnership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	de	v	(A)	(D)	Date Exercisa	ble	Exp	piration te	Title	Amo or Num of Shar	ber						
Non- Qualified Stock Option (right to buy)	\$12.4	01/03/2017		A	A		8,064		02/03/20	17 ⁽¹⁾	01/	/03/2027	Commor Stock	8,00	54	\$4.9603 ⁽²⁾	8,064		D		

Explanation of Responses:

1. This option shall vest and become exercisable as to 8,064 shares divided into equal monthly installments such that the option shall be 100% vested on January 3, 2018.

2. This option was issued to the reporting person pursuant to the Cytokinetics 2004 Equity Incentive Plan in lieu of an annual retainer of \$40,000.00.

By: Sharon A. Barbari For: John T. Henderson

** Signature of Reporting Person Date

01/04/2017

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.