FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
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* HEIDRICH A GRANT III				CY	2. Issuer Name and Ticker or Trading Symbol CYTOKINETICS INC [CYTK]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
	(Fir	,	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/24/2004									belo	•	X Other below	<i>'</i>	
	SUITE 250				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MENLO	PARK CA	A 9	4025	i									X		n filed by Mor	Reporting Per e than One Re		
(City)	(St	ate) (2	Zip)															
1 Title of 9	Socurity (Inc		eI-	Non-Deriv			urities A	quired	, Dis	.					ed	6. Ownership	7. Nature	
1. Title of Security (Instr. 3)			Date (Month/Day/		Execution Date,		Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3 5)				Secur Bene Owne	urities eficially ned	Form: Direct (D) or Indirect (I)	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			11/24/20	004			S	Г	70,870		D	\$8.5576	5 1,	805,488	I ⁽¹⁾⁽²⁾	by MF IX	
Common	Stock			11/26/20	004			S		9,500		D	\$8.7235	5 1,	795,988	I ⁽¹⁾⁽²⁾	by MF IX	
Common	Stock			11/29/20	004			S		14,630		D	\$8.8013	3 1,	781,358	I (1)(2)	by MF IX	
Common	Stock			11/24/20	004			S		3,730	T	D	\$8.5576	5 9	95,025	I ⁽¹⁾⁽²⁾	by MFAIV	
Common Stock			11/26/2004				S		500		D	\$8.7235	5 9	94,525	I ⁽¹⁾⁽²⁾	by MF AIV		
Common Stock			11/29/2004				S		770	0 D \$		\$8.8013	93,755		I (1)(2)	by MF AIV		
Common	Stock													2	29,040	I (3)	TTEE	
		Та	ble I	I - Derivati (e.g., ρι						osed of, convertib				Owned	l			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date,		4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expirat (Month	ion D		7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)		of De Se (Ir	rivative Security Str. 5) Owner Follo Repo	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A) (D)	Date Exercis	able	Expiration Date	Title	or Nu of	ount mber ires	er				

Explanation of Responses:

- 1. The Reporting Person is a Managing Director of Mayfield IX Management, LLC, which is the sole General Partner of each of Mayfield IX (MF IX) and Mayfield Associates Fund IV (MF AIV). The Reporting Person may be deemed to have shared voting and dispositive power over the shares which are or may be deemed to be beneficially owned by MF IX and MF AIV, but disclaims such beneficial ownership, except to the extent of his pecuniary interest therein.
- 2. The filing of this statement shall not be deemed an admission that, for the purposes of Section 16 of the Securities Exchange Act of 1934 or otherwise, the Reporting Person is the beneficial owner of equity securities covered by this statement.
- 3. The Reporting Person is a Trustee of certain family trusts.

Remarks:

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.