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* SMITH SANDFORD D						2. Issuer Name and Ticker or Trading Symbol CYTOKINETICS INC [ CYTK ]								Relationship of Reporting (Check all applicable)     X Director				Person(s) to Issuer		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 04/02/2012									Office: below)	r (give title )		Other ( below)	specify		
280 EAST GRAND AVENUE					4. If A	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)	(S	tate) (	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 Dispose Code (Instr. and 5)			ities Acc				ies ially	Forn (D) c	rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)		rice	Reporte Transac			4)	(111301. 4)			
			Table						quired, Dis					y Ov	vned					
			Execution if any	A. Deemed 4 Execution Date, 1		4. Transaction Code (Instr.		5. Number of		6. Date Exercisabl Expiration Date (Month/Day/Year)		7. Title Amoun Securiti Underly Derivati	7. Title and Amount of Securities Jnderlying Derivative Security (Instr. 3		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amo or Num of Shar	ber						
Non- Qualified Stock Option (right to buy)	\$1.14	04/02/2012			Α		16,447		05/02/2012 <sup>(</sup>	1) 0	4/02/2022	Commo Stock	n 16,4	147	\$0.456 <sup>(2)</sup>	16,447		D		
Non- Qualified Stock Option (right to buy)	\$1.05								04/05/2012 <sup>(</sup>	3) 0	3/05/2022	Commo Stock	40,0	000		40,000		D		

## Explanation of Responses:

- 1. This option shall vest and become exercisable as to 16,447 shares divided into equal monthly installments such that the option shall be 100% vested on January 2, 2013.
- 2. This option was issued to the reporting person pursuant to the Cytokinetics 2004 Equity Incentive Plan in lieu of an annual retainer of \$7,500.
- 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 March 5, 2015.

By: Sharon A. Barbari For: Sandford D. Smith

04/04/2012

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.