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MEDICINOVA INC Form 3

October 17, 2013

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

Â OBrien Geoffrey

(Last)

(First)

(Middle)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Statement

(Month/Day/Year)

10/15/2013

MEDICINOVA INC [MNOV]

(Check all applicable)

Vice President

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O MEDICINOVA, INC., 4275 EXECUTIVE **SQUARE, SUITE 650**

(Street)

10% Owner Director _X__ Officer

Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

LA JOLLA. CAÂ 92037

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security

(Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership 4. Nature of Indirect Beneficial Ownership

Form: Direct (D) or Indirect (I)

(Instr. 5)

Common Stock

5,000

(Instr. 5) D

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Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Price of Derivative Security:

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Warrant (right to buy)	03/29/2011	03/29/2016	Common Stock	5,000	\$ 3.56	D	Â
Employee Stock Option (right to buy)	(1)	07/06/2019	Common Stock	25,000	\$ 4.8	D	Â
Employee Stock Option (right to buy)	(2)	01/28/2020	Common Stock	11,900	\$ 7.34	D	Â
Employee Stock Option (right to buy)	(3)	07/12/2021	Common Stock	32,000	\$ 2.54	D	Â
Employee Stock Option (right to buy)	06/14/2012	08/02/2021	Common Stock	26,250	\$ 2.46	D	Â
Employee Stock Option (right to buy)	(4)	05/12/2023	Common Stock	22,500	\$ 4.1	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				
coporting of the reality reality	Director	10% Owner	Officer	Other	
OBrien Geoffrey C/O MEDICINOVA, INC. 4275 EXECUTIVE SQUARE, SUITE 650 LA JOLLA, CA 92037	Â	Â	Vice President	Â	

Signatures

/s/ Geoffrey
O?Brien

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) The option vested over a period of 4 years in equal monthly installments from the 7-7-09 date of grant and is now fully vested.
- (2) The option vests over a period of 4 years in equal monthly installments from the 1-29-10 date of grant.
- (3) The option vests over a period of 4 years in equal monthly installments from the 7-13-11 date of grant.
- (4) The option vests over a period of 4 years in equal monthly installments from the 5-13-13 date of grant.

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Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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