FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* Morris Arlene					2. Issuer Name and Ticker or Trading Symbol MEDICINOVA INC [MNOV]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
										-			X	Directo	r		10% Ov	vner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/14/2011						\dashv	Officer (give title Other (speci below) below)					pecify		
C/O ME	DICINOVA	, INC.		100	117/2	.011													
4350 LA JOLLA VILLAGE DRIVE, SUITE 950				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)												["	X	Eorm f	iled by One	a Dani	orting Perso	,	
SAN DII	EGO C.	A !	92122										Λ		iled by Moi		n One Repo		
(City)	(S	tate)	(Zip)																
		Tab	le I - Non-Der	ivative	e Se	curitie	s Ac	quired, [Disp	osed o	of, or Be	neficia	lly C	Owned	l				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) o	r Price	Transa		tion(s) and 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exercisa Expiration Date (Month/Day/Year		e Amount ar) Securition Underlying Derivation		Title and mount of scurities nderlying erivative Security nstr. 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own For Dire or I (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		opiration	Title	Amount or Number of Shares							
Stock Option (Right to Buy)	\$2.28	06/14/2011		A		1,000		12/14/2011	06	5/13/2011	Common Stock	1,000	\$	\$0.00	1,000		D		

Explanation of Responses:

06/28/2011 /s/ Yuichi Iwaki, Atty-in-Fact

** Signature of Reporting Person

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

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.

^{*} 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).