FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | | |
|--------------------------|----------------------|--|--|--|--|--|--|--|
| OMB Number: | MB Number: 3235-0104 | | | | | | | |
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | or Sec | tion 30(h) of | f the Investment Company Act of 19 | 940 | | | | |
|---|-----------------------------------|--|---------------------|---|--|--|-------------------------------------|---|---------------------------------|--|
| 1. Name and Address of Reporting Person* Satomi Hajime 2. Date of Event Requiring Statement (Month/Day/Year) 05/13/2013 | | | ment | 3. Issuer Name and Ticker or Trading Symbol MEDICINOVA INC [MNOV] | | | | | | |
| (Last) C/O MEDIC | (First) (Middle) MEDICINOVA, INC. | | | | 4. Relationship of Reporting Perso (Check all applicable) Director X | () | (Mc | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | |
| 4275 EXECUTIVE SQUARE, STE 650 | | | | Officer (give title below) | Other (spe below) | | ndividual or Joint licable Line) | t/Group Filing (Check | | |
| (Street) | | | | | | | | Form filed b | y One Reporting Person | |
| LA JOLLA | CA | 92037 | | | | | | Form filed b Reporting P | y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | |
| | | | Table I - No | n-Derivat | tive Securities Beneficiall | ly Owned | | | | |
| 1. Title of Security (Instr. 4) | | | | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | | Beneficial Ownership | | |
| Common Stock | | | | 467,000 | D | | | | | |
| Common Stock | | | | 1,000,000 | I B | | By Limited Liability Company | | | |
| | | (e. | | | re Securities Beneficially ants, options, convertible | | s) | | | |
| Expi | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr | | 4. Conversion or Exercise | | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Derivative Security | or Indirect (I) (Instr. 5) | | |
| Common Stoo | ck Warrant (Rig | ght to Buy) | 05/13/2013 | 05/13/2018 | Common Stock | 750,000 | 3.15 | I | By Limited Liability Company | |

Explanation of Responses:

Remarks:

/s/ Hajime Satomi

05/17/2013

** Signature of Reporting Person

Date

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.

 $^{^{\}star}$ 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).