FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington.	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
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0.5

hours per response:

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 or Section 30(h) of the Investment Company Act of 1940

					UI	Occui	011 30(11) 0	Ji tiic	iiivesiiiieiii	Comp	Daily Act	01 1340						
1. Name and Address of Reporting Person* Morris Arlene					2. Issuer Name and Ticker or Trading Symbol MEDICINOVA INC [4875 OSE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					, ,								X Direct	or		10% Ow	ner	
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/12/2006								Officer below)	(give title		Other (s below)	pecify
4350 LA	JOLLA VI	LLAGE DRIVE	E, SUITE 9	950														
					4 1	f Ame	ndment [Date (of Original Fi	led (N	Month/Da	v/Year)	6.11	ndividual or	loint/Group	Filing	(Check App	licable
(Ctt)					_ 4. "	AIIIC	nument, L	Jaie	n Originari i	ieu (ii	vioriti // Da	iy/ rear)	Line		Johnsoroup	i i iiii ig	(Спеск Арр	ilicable
(Street)		Α.	02422											X Form	filed by One	Repo	orting Person	ı
SAN DII	EGO CA	A	92122		_									Form t		e than	One Report	ting
(City)	(Si	ate)	(Zip)															
		Tab	le I - Nor	า-Deriง	vativ	e Se	curities	s Ac	quired, D	ispo	osed o	f, or Be	neficial	ly Owne	t			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				Benefic Owned	es F ally (I Following (I	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	, .	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
		7							uired, Dis					Owned		,	,	
				(e.g., p	puts,	call	s, warra	ants	, options	, co	nvertil	ble secu	ırities)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execut (Month/Day/Year) if any	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)				6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	itive derivativ	e ss ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		piration ite	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$9.73	11/12/2006			A		20,000		(1)	11/	/11/2016	Common Stock	20,000	\$0	20,000	0	D	

Explanation of Responses:

1. The option is fully vested and exercisable on November 12, 2007.

Remarks:

/s/ Shintaro Asako, Attorney-

in-Fact

** Signature of Reporting Person Date

11/14/2006

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.