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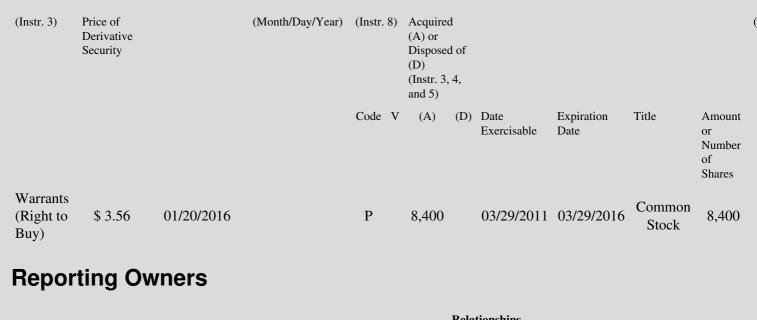
MEDICINOV	A INC								
Form 4									
January 21, 20	016								
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL		
UNITED STATES SECURITIES AND EXCE Washington, D.C. 2054						E COMMISSION	N OMB Number:	3235-0287	
Check this if no longer subject to Section 16. Form 4 or Form 5	Filed pur	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							January 31, 2005 average urs per . 0.5
obligations may contin <i>See</i> Instruct 1(b).	ue. Section 17((a) of the F	Public U	Itility Hol	ding Con		of 1935 or Section	on	
(Print or Type Re	sponses)								
1. Name and Add Okajima Masa	2. Issuer Name and Ticker or Trading Symbol MEDICINOVA INC [MNOV]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)	3. Date o	of Earliest T	ransaction		(Cne	ск ап аррисаы	e)
	NOVA, INC., 4 SQUARE, SU	4275		Day/Year)			Director X_ Officer (giv below) VP and H		% Owner her (specify e Office
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LA JOLLA, C	CA 92037						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned
	Transaction Date Aonth/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	Code (Instr. 8)	4. Securiti nAcquired Disposed (Instr. 3, 4	(A) or of (D) and 5) (A) or	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	(D) Price			
Reminder: Repor	t on a separate line	e for each cla	uss of sec	urities bene	Perso inform requir	ns who res nation cont ed to resp ys a curre	or indirectly. spond to the colle tained in this form ond unless the for ntly valid OMB co	n are not rm	SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	nof Derivative	Expiration Date	Underlying Securities I
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4) S

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Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Okajima Masatsune C/O MEDICINOVA, INC. 4275 EXECUTIVE SQUARE, SUITE 650 LA JOLLA, CA 92037			VP and Hea of Japanese Office	d			
Signatures							

/s/ Yuichi Iwaki, attorney-in-fact 01/20/2016

**Signature of Reporting Person

Date

Explanation of Responses:

* 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. 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.