Edgar Filing: ARQULE INC - Form 4

AROULE INC

Form 4 January 19, 2	0016											
FORM										PPROVAL		
-	UNIII	ED STATE		ITIES A			NGE (COMMISSION	OMB Number:	3235-0287		
Subject to Section 16. Form 4 or				CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES ection 16(a) of the Securities Exchange Act of 1934						Expires: January 31 2005 Estimated average burden hours per response 0.5		
obligation may cont <i>See</i> Instru 1(b).	ns Section	17(a) of the		ility Hold	ling Com	ipany	Act o	f 1935 or Sectio	n			
(Print or Type F	Responses)											
1. Name and Address of Reporting Person *2. IssueSCHWARTZ BRIANSymbol				lssuer Name and Ticker or Trading bol				5. Relationship of Reporting Person(s) to Issuer				
	ARQUL	ARQULE INC [ARQL]					(Check all applicable)					
(Mon				3. Date of Earliest Transaction (Month/Day/Year) 01/14/2016				Director 10% Owner X Officer (give title Other (specify below) below) Chief Medical Officer				
			Amendment, Date Original l(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
BURLINGT	CON, MA 018	03						Form filed by M Person	Iore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	Derivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execut any		3. Transactic Code (Instr. 8)		ties Ad isposed	cquired d of 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common Stock	01/14/2016			F	2,847	D	\$ 1.86	48,585	D			

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

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 Acquired, Disposed of, or Beneficially Owned

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Title Amoun Under! Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other				
SCHWARTZ BRIAN C/O ARQULE, INC. 1 WALL STREET, 6TH FLOOR BURLINGTON, MA 01803			Chief Medical Officer					
Signatures								
Peter S. Lawrence By Power of Att Schwartz	01/19/2016							
<u>**</u> Signature of Reporting F	Date							
Evenlawskiew of Door								

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.