LIEF JACK Form 4 January 18, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

C/O ARENA

1. Name and Address of Reporting Person * LIEF JACK

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

ARENA PHARMACEUTICALS

INC [ARNA]

10% Owner

(Check all applicable)

3. Date of Earliest Transaction

(Month/Day/Year)

_X__ Director X_ Officer (give title Other (specify below)

01/17/2005

President and CEO

PHARMACEUTICALS, INC., 6166

(Street)

(First)

(Middle)

NANCY RIDGE DRIVE

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 Form filed by More than One Reporting

SAN DIEGO, CA 92121

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

Reported (A)

Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amou Underlying Securi (Instr. 3 and 4) | |
|---|---|---|---|--|--|--|--------------------|--|--------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amo Num Shar |
| Employee Stock Option (right to buy) | \$ 6.16 | 01/17/2005 | | A | 100,000 | 01/17/2005(1) | 01/17/2015 | Common Stock | 100 |
| Employee Stock Option (right to buy) | \$ 6.16 | 01/17/2005 | | A | 24,350 | 01/17/2005 | 01/17/2015 | Common Stock | 24 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---------------------------------|---------------|-----------|---------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| LIEF JACK | | | | | | |
| C/O ARENA PHARMACEUTICALS, INC. | X | | President and CEO | | | |
| 6166 NANCY RIDGE DRIVE | | | Flesidelli alid CEO | | | |
| SAN DIEGO, CA 92121 | | | | | | |

Signatures

Adam S. Chinnock, as Attorney-in-Fact

01/18/2005

**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).
- (1) The options are exercisable upon grant, but vest in four equal annual installments beginning on January 17, 2006.

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.

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