Edgar Filing: ARQULE INC - Form 4

ARQULE IN Form 4 January 16, 2										
FORM	1 4							OMB A	PPROVAL	
	UNITED		RITIES AN ashington, D			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or								Expires: Estimated a burden hou response		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a			ng Com	pany	Act of	f 1935 or Section			
(Print or Type I	Responses)									
1. Name and A SCHWART	ssuer Name and Ticker or Trading bol QULE INC [ARQL]				5. Relationship of Reporting Person(s) to Issuer					
			3. Date of Earliest Transaction				(Check all applicable)			
C/O ARQU PRESIDEN	Ionth/Day/Year) 1/14/2014				Director 10% Owner X Officer (give title Other (specify below) below) Chief Medical Officer					
	nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person					
WOBURN,	MA 01801						Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip) Ta	ble I - Non-Der	ivative S	ecuri	ties Acc	luired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		f Transaction(Code ((A) or Di (D) Instr. 3, 4	sposed	l 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)		
Common Stock	01/14/2014		F 2	2,847	D	\$ 2.36	54,279	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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. 19 PRESIDENTIAL WAY WOBURN, MA 01801			Chief Medical Of	ficer				
Signatures								
Robert J. Connaughton, Jr. By Power of Attorney for Brian Schwartz 01/16/2014								
<u>**</u> Signature of	Reporting Pe	erson		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.