### Edgar Filing: ARENA PHARMACEUTICALS INC - Form 3

ARENA PHARMACEUTICALS INC Form 3 February 14, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549

### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

#### **OMB APPROVAL**

OMB 3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Form filed by More than One

Person

Reporting Person

4. Nature of Indirect Beneficial

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> FETZER OLIVER		2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ARENA PHARMACEUTICALS INC [ARNA]		
(Last)	(First)	(Middle)	02/13/2017	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O AREN	Δ				(Monul/Day/Tear)

(Check all applicable)

(give title below) (specify below)

SEC 1473 (7-02)

\_X\_\_ Director

Officer

10% Owner

\_ Other

# PHARMACEUTICALS, INC., 6154 NANCY RIDGE DRIVE

(Street)

# SAN DIEGO, CAÂ 92121

					Reporting rerson	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned			
1.Title of Secu (Instr. 4)	rity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Benefi Ownership (Instr. 5)	

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address		Relationships				
The pointing of the extension of the second	Director	10% Owner	Officer	Other		
FETZER OLIVER C/O ARENA PHARMACEUTICALS, INC. 6154 NANCY RIDGE DRIVE SAN DIEGO, CA 92121	ÂX	Â	Â	Â		
Signatures						
Steven W. Spector, as Attorney-in-Fact	2/14/2017					
**Signature of Reporting Person	Date					

# **Explanation of Responses:**

## No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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.