#### Edgar Filing: SCHNEIDER PHILLIP M - Form 4

SCHNEIDE	ER PHILLIP M									
Form 4										
June 18, 20	12									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
	Check this box				Expires:	January 31,				
subject t Section	if no longer subject to Section 16. Form 4 or					Estimated average burden hours per response 0.5				
Form 5 obligation may corn See Instruction 1(b).	ons ntinue. Section 17	(a) of the	Public U		ding Cor	npany Ac	ange Act of 1934, ct of 1935 or Sectio 1940	on		
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> SCHNEIDER PHILLIP M			2. Issuer Name and Ticker or Trading Symbol ARENA PHARMACEUTICALS INC [ARNA]			5. Relationship of Reporting Person(s) to Issuer				
						(Cheo	(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify below) below)				
	IA CEUTICALS, IN IDGE DRIVE	NC., 6166	06/15/2	2012						
(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				
SAN DIEG	GO, CA 92121						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities	Acquired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security       2. Transaction Date (Month/Day/Year)       2A. Deeme Execution I any (Month/Day         (Instr. 3)       any (Month/Day		Date, if	Date, if TransactionAcquired (A) or Code Disposed of (D) /Year) (Instr. 8) (Instr. 3, 4 and 5) (A)			SecuritiesIBeneficially()Owned()Following()Reported()Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(D) Pric	e (Instr. 3 and 4)			
Reminder: Re	port on a separate li	ne for each cl	ass of sec	urities bene	ficially ow	ned directly	y 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)

### Reporting Owners

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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. 5. Number of Transactio/Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.4	06/15/2012	А	48,000	<u>(1)</u>	06/15/2022	Common Stock	48,000	

# **Reporting Owners**

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
SCHNEIDER PHILLIP M C/O ARENA PHARMACEUTICALS, INC 6166 NANCY RIDGE DRIVE SAN DIEGO, CA 92121	· X							
Signatures								
Adam S. Chinnock, as Attorney-in-Fact	06/18/2012	2						
**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 vest in 12 equal monthly installments over one year beginning on July 15, 2012, and are exercisable once vested.

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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