

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2013-01-15** | Period of Report: **2013-01-14**  
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### REPORTING OWNER

#### **Pucci Paolo**

CIK: **1436861**

Type: **4** | Act: **34** | File No.: **000-21429** | Film No.: **13530675**

Mailing Address  
C/O ARQULE, INC.  
19 PRESIDENTIAL WAY  
WOBURN MA 01801

### ISSUER

#### **ARQULE INC**

CIK: **1019695** | IRS No.: **043221586** | State of Incorp.: **DE** | Fiscal Year End: **1231**  
SIC: **2834** Pharmaceutical preparations

Mailing Address  
19 PRESIDENTIAL WAY  
WOBURN MA 01801

Business Address  
19 PRESIDENTIAL WAY  
WOBURN MA 01801  
781-994-0300

# FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

OMB APPROVAL	
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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person <u>Pucci Paolo</u>  (Last) (First) (Middle)  <u>C/O ARQULE, INC., 19 PRESIDENTIAL WAY</u>  (Street)  <u>WOBURN, MA 01801</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>ARQULE INC [ARQL]</u>  3. Date of Earliest Transaction (Month/Day/Year) <u>01/14/2013</u>  4. If Amendment, Date Original Filed(Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <span style="float: right;">_____ 10% Owner</span> <input checked="" type="checkbox"/> Officer (give title below) <span style="float: right;">_____ Other (specify below)</span> <p style="text-align: center;"><u>Chief Executive Officer</u></p> 6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person
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**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)			

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)**

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. Transaction Code (Instr. 8)		5. Number of 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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
<u>Employee Stock Options</u>	<u>\$2.51</u>	<u>01/14/2013</u>		<u>A</u>		<u>285,000</u>		<u>01/14/2014</u> <sup>(1)</sup>	<u>01/14/2023</u>	<u>Common Stock</u>	<u>285,000</u>	<sup>(2)</sup>	<u>1,725,000</u>	<u>D</u>	

**Explanation of Responses:**

1. The options vest in four equal annual installments beginning on January 14, 2014.
2. Employee Stock Option grant.

**Signatures**

Robert J. Connaughton, Jr. By Power of Attorney for Paolo Pucci

\*\* Signature of Reporting Person

01/15/2013

Date

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

\* 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.

**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 Number.**