FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APP | ROVAL |
|--------|-------------|----------|
| EDCHID | OMB Number: | 3235-028 |

Estimated average burden hours per response:

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

| IIISUUC | tion I(b). | | | File | | | | | | | es Excnan npany Act | | | 4 | | | | | |
|---|--|-------------------------------|---|--------------------------|---|--|--|--------------------------------------|--|---|------------------------|--|--|--|--|--|---|--|---|
| | nd Address of <u>Y</u> Corinn | Reporting Person [*] | | | | | | | ker or Trac BIOSC | | Symbol NCES I | NC | [NBI | X Ch | telationship of the contract o | cable) | g Pers | son(s) to Issi 10% Ow | |
| (Last) (First) (Middle) 12780 EL CAMINO REAL | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2015 | | | | | | | _ | | Officer (give title below) | | Other (s below) | pecify | | | | |
| (Street) SAN DII | | | 92130 (Zip) | | | f Ame /01/2 | , | Oate o | of Original | Filed | (Month/Da | ay/Ye | ar) | Line | X Form f | iled by One | e Repo | (Check Apporting Person | 1 |
| | | Tak | ole I - Nor | n-Deriv | ative | e Se | curities | Ac | quired, | Dis | posed o | f, o | r Bene | ficial | y Owned | | | | |
| Date | | | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | (A) or 3, 4 and | 5. Amou Securitie Beneficia Owned F Reported | s Form ally (D) or following (I) (In | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | nount (A) or (D) | | Price | Transact | Transaction(s) (Instr. 3 and 4) | | | | |
| | | | Table II - | | | | | | | | osed of, onverti | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | Date, T | I. Fransaction Code (Instr. 3) | | 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 Amou of Securities Underlying Derivative Securit (Instr. 3 and 4) | | ecurity | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | N 0 | lumber | | | | | |

Explanation of Responses:

\$42.76

1. Option vests in 12 equal monthly installments beginning June 28,2015.

05/28/2015

Option⁽¹⁾

Form 4(A) is being filed to attach the Power of Attorney which was inadvertently omitted at the original filing of the Form 4.

/s/Darin Lippoldt, Attorney-In-

25,000

Fact

Title Common

Stock

05/27/2025

05/23/2016

\$0.00

25,000

D

** Signature of Reporting Person 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.

06/28/2015

25,000

The undersigned, as a Director of Neurocrine Biosciences, Inc. (the "Corporation"), hereby constitutes and appoints, jointly and severally Kevin C. Gorman, Timothy P. Coughlin and Darin Lippoldt, each of them, the undersigned's true and lawful attorney-in-fact and agent, each with the power of substitution for him in any and all capacities to complete and execute such Forms 144, advisable pursuant to Rule 144 promulgated under the Securities Act of 1933 (as amended) and Forms 3, 4, and 5 advisable pursuant to section 16 of the Securities Exchange Act of 1934, and other forms as such attorney shall in his discretion determine to be required by the rules and regulations promulgated thereunder, or any successor laws and regulations, as a consequence of the undersigned's ownership, acquisition or disposition of securities of the Corporation, and to do all acts necessary in order to file such forms with the Securities and Exchange Commission, any securities exchange or national association, the Corporation and such other person or agency as the attorney shall deem appropriate. The undersigned hereby ratifies and confirms all that said attorneys-in-fact and agents shall do or cause to be done by virtue hereof.

This Limited Power of Attorney is executed at San Diego, California, as of the date set forth below.

/s/ Corinne H. Nevinny Corinne H. Nevinny

Date: February 3, 2015