FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OIVIB APPROVAL								
[c	OMB Number:	3235-0287							
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0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Instruction 1(b).					ed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940						4		hours	per res	ponse:	0.5		
1. Name and Address of Reporting Person* RASTETTER WILLIAM H				2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [NBIX]							ck all application	onship of Reporting Pers Il applicable) Director Officer (give title below)		on(s) to Iss 10% Ov Other (s	vner			
(Last) (First) (Middle) 12780 EL CAMINO REAL				3. Date of Earliest Transaction (Month/Day/Year) 05/22/2017							below)			below)				
(Street) SAN DII			92130 (Zip)		4. If Ame	endment, I	Date of	f Original I	Filed	(Month/Day	//Year)		6. Inc Line)	Form fi	ed by One	e Repo	(Check Ap rting Perso One Repo	n
		Tal	ole I - Non	-Deriva	ative Se	curitie	s Acc	quired,	Dis	osed of	f, or E	Bene	eficially	/ Owned				
Date				2. Transa Date (Month/D	Execution Date, Transaction Disposed Of (D) (Instr. 3,			(A) or 3, 4 and		es Forr ially (D) o Following (I) (II		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A (D) or)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
			Table II - C							sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Co	ansaction ode (Instr.	saction of Ex			ercisa Date y/Yea	ble and	or		Security 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Date

Exercisable

06/22/2017(1)

(D)

Explanation of Responses:

\$53.64

1. Option vests in 12 equal monthly installments beginning June 22, 2017.

05/22/2017

Remarks:

Stock

/s/Darin Lippoldt, Attorney-In-

18,000

\$0.00

Fact

Title

Common

Stock

Expiration Date

05/22/2027

** Signature of Reporting Person

18,000

06/08/2017

D

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).

Code

Α

(A)

18,000

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.