FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average b	urden								

0.5

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				or	Sectio	n 30(l	h) of the	Investment	Comp	cany Act	of 1940						
1. Name and Address of Reporting Person*  RANIERI RICHARD J			<u>N</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) NEUROCRINE BIOSCIENCES, INC.				$- ^{NI}$	NBIX ]								X Office below	(give title		Other (s	specify
					3. Date of Earliest Transaction (Month/Day/Year) 10/24/2007								Sr. VP, Human Resources				
	L CAMINO	· ·		10	1/24/20												
(Street)				4.	If Amei	ndmer	nt, Date	of Original F	iled (I	Month/D	ay/Year)	6. I Lin	ndividual or e)	Joint/Group	Filing	g (Check Ap	plicable
SAN DII	EGO C.	A	92130											filed by One		Ü	
				-									Perso	filed by Mor n	e tnar	1 One Repo	rting
(City)	(S		(Zip)														
		Tab	le I - Non-De		_			_	_				_				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.				ear) if	2A. Deemed Execution Date, if any (Month/Day/Year		r, Transaction Disposed Code (Instr. 5)		ities Acquir d Of (D) (Ins		Securiti Benefic Owned	rities For ficially (D) ed Following (I) (		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	mount (A) or (D)							
		7	able II - Der (e.g					quired, Di s, options					/ Owned				
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)	Code	Transaction Code (Instr.		umber ivative urities uired or oosed O) tr. 3, 4 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)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares					
Stock Option (right to	\$60.95	10/24/2007		D			6,000	02/19/2006	01/	19/2013	Common Stock	6,000	\$0.0167 <sup>(1)</sup>	0		D	

## **Explanation of Responses:**

1. The option was cancelled by mutual agreement of the reporting person and Neurocrine Biosciences, Inc. The reporting person received \$100 as consideration for the cancellation.

## Remarks:

<u>Margaret E. Valeur-Jensen, By</u> <u>Power of Attorney</u> <u>10/26/2007</u>

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.