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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							.,												
1. Name and Address of Reporting Person* Sharp Shalini						2. Issuer Name and Ticker or Trading Symbol <u>NEUROCRINE BIOSCIENCES INC</u>								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
						NBIX]								Х				10% Ow	
															Officer below)	(give title		Other (s below)	pecify
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									below)			below)	
12780 EL CAMINO REAL						05/19/2021													
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SAN DIEGO CA 92130													<u>X</u>	Form fi	led by One	Repo	orting Persor	1	
			52150														•	One Repor	
(City) (State) (Zip)														Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Trans Date (Month/		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I	Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4		and Securitie Beneficia Owned F		es For ally (D) Following (I) (: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Pric	се	 Reported Transact (Instr. 3 a) 	ion(s)		°	(Instr. 4)
	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 I if any (Month/Day	Date,	ate, Transacti Code (Ins				6. Date Exercisable a Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)		8. Price c Derivativ Security (Instr. 5)			ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	ber					
Non- Qualified	\$92.35	05/19/2021			A		8,833		06/19/2021	(1)	05/19/2031	Common	8.83	33	\$0.00	8,833		D	

Explanation of Responses:

1. Option vests in 12 equal monthly installments beginning June 19, 2021.

Remarks:

Option

/s/ Darin Lippoldt, Attorney-in-05/20/2021

Fact

** 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.