FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

KILIEO	AND EXCUANGE COMMISSION
	D C 00540

	OMB APP	ROVAL
I٦	OMP Number:	2225 020

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c) See Instruction 10

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

See Ins	struction 10.																				
Name and Address of Reporting Person* Delaet Ingrid					2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [NBIX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
														NB	-		(give title		Other (
(Last) (First) (Middle) 12780 EL CAMINO REAL						3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024									Officer (give title below) Chief Regulatory Officer						
		4. If	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable									
(Street) SAN DII	EGO C	Δ	92130											Liı	ne)	Form f	iled by One	Ren	orting Perso	ın.	
- DI	LGO C.		72130												Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	(State) (Zip)												Persor	1						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				2. Transa Date (Month/E	nsaction n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		, [Transaction Dispos		Disposed	ties Acquir d Of (D) (Ins		and Securities Beneficial Owned Fo		es ally Following	6. Owne Form: D (D) or In ving (I) (Instr.		7. Nature of Indirect Beneficial Ownership	
									(Code	v	Amount	(A) o	Price	rice Report Transa (Instr.		tion(s)			(Instr. 4)	
Common Stock 12/31/2					/2024	2024				M		272	A	\$79.	79.02 2,		,779		D		
Common Stock 12/31/2					/2024	2024				S ⁽¹⁾		272	D	\$138	138.1 2,		,507		D		
		Т	able II -										, or Ben ble sec			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transa	I. Transaction Code (Instr.		5. Number 6		Date Exemplication I	rcisa Date	ble and	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. I De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	Amount or Number of Shares							
Non- Qualified Stock Option	\$79.02	12/31/2024			М			272		(2)	0	1/31/2032	Common Stock	272		\$0	2,718		D		

Explanation of Responses:

- 1. The disposition reported in this Form 4 was effected by a broker pursuant to instructions set forth in a Rule 10b5-1 trading plan adopted by the Reporting Person on November 29, 2023.
- 2. The option was granted January 31, 2022 and vests in 48 equal monthly installments beginning February 28, 2022. These options will expire ten years from the date of grant on January 31, 2032.

Remarks:

/s/ Darin Lippoldt, Attorney-in-01/03/2025 **Fact**

** Signature of Reporting Person

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.