FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* OBrien Christopher Flint | | | | | | 2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [NBIX] | | | | | | | | of Reportin icable) or or (give title | g Pers | 10% Ov | vner | |
|--|---|--|--|------|---|---|-----|--|----|--|---|--|--|--|---|--|---------------------------------------|--|
| (Last) (First) (Middle) NEUROCRINE BIOSCIENCES, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/31/2005 | | | | | | | | X Office below Sr. V |) P & Chief | Med | below) lical Offic | er | |
| 12790 EL CAMINO REAL | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) SAN DIEGO CA 92130 | | | 92130 | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (S | tate) | (Zip) | | Person | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date | | | Transaction Dispose Code (Instr. 5) | | ties Acquired (A) or d Of (D) (Instr. 3, 4 an | | Benefic | es ially Following | Form (D) o | vnership n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | (A) ((D) | Price | Transac | r. 3 and 4) | | | (111501.4) | |
| 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 Dat if any (Month/Day/Ye | Code | saction (Instr. | | | 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) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | y V | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | | | | | |
| Stock Option ⁽¹⁾ | \$52.82 | 10/31/2005 | | A | | 55,000 | | 10/31/2006 | 10 | 0/31/2015 | Common Stock | 55,000 | \$52.82 | 55,00 | 0 | D | | |

Explanation of Responses:

1. Represents option of which 25% of the shares underlying the option becomes vested and exercisable on October 31, 2006 and an additional 1/48th of the shares underlying the option becomes vested and exercisable each month thereafter.

Remarks:

Margaret E. Valeur-Jensen, By

11/02/2005

Power of Attorney ** 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.