FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

wasnington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

OMB APPROVAL

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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*     Nevinny Corinne H						2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [ NBIX ]									all applic	able) r	g Pers	on(s) to Issi	ner	
(Last) 12780 El	,	(First) (Middle) CAMINO REAL					3. Date of Earliest Transaction (Month/Day/Year) 05/03/2016									Officer (give title below)		Other (s below)	респу	
(Street) SAN DII (City)	SAN DIEGO CA 92130				4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable c)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - No	n-Deri	ivativ	e Se	curit	ties Ac	quired	, Dis	sposed o	f, or Be	nefici	ally	Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					ur) Ex	A. Deemed Execution Date, f any Month/Day/Year)		3. Transa Code (1 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		d (A) or r. 3, 4 ar	nd 5) Securition Benefici Owned I		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 05/03/2						:016			M	V	15,000	A	\$3.0	)7 <sup>(1)</sup>	31,577			D		
Common Stock 05/03/2						2016				V	1,022	D	\$45.	05(1)	(1) 30,555		D			
		-	Γable II ·								osed of, converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,		Transaction Code (Instr.		ı of l		exerci on Dat Day/Ye		of Securities		D	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	g g dision(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er						
Non- Qualified Stock	\$3.07	05/03/2016			М	v		15,000	06/29/20	009	05/29/2016	Common Stock	15,00	00	\$0.00	0		D		

## **Explanation of Responses:**

1. The share issuance reported on Table I reflects shares issued upon the exercise of options granted on May 29, 2009, which, if unexercised, would have expired on May 29, 2016. The option exercises are reported on Table II. These option exercises were pursuant to a net issuance arrangement effected under the issuer's equity incentive plan. The number of shares issued pursuant to the net issuance arrangement was calculated as follows: the option exercise price (\$3.07) was subtracted from the May 3, 2016 market close price (\$45.05), and this net amount (\$41.98) was then multiplied by the number of options (15,000), with the resulting amount then divided by the market close price to result in a net issuance of 13,978 shares to the optionee. The 1,022 shares underlying the remaining portion of the options are not available for reissuance, and no shares were sold into the market as part of the exercise in connection with a net issuance program.

## Remarks:

/s/ Darin Lippoldt, Attorney-in-Fact 05/05/2016

\*\* Signature of Reporting Person

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.