Instruction 1(b).

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 C
Section 16. Form 4 or Form 5	
obligations may continue. See	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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

1. Name and Address of Reporting Person*  Delaet Ingrid					NI	2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC NBIX								neck all appli Directo	onship of Reportin all applicable) Director Officer (give title		10% Ov Other (s	vner
(Last) (First) (Middle) 12780 EL CAMINO REAL				3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024								Chief Regulatory Officer						
(Street) SAN DIF	EGO C.	<b>A</b> 9	92130		4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate) (	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							ed to						
		Tabl	e I - Non	ı-Deriv	ative	Sec	uriti	es Ac	quired,	Dis	posed o	of, or Be	neficia	lly Owne	d			
, (		2. Transa Date (Month/D	Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 5			ecurities Acquired (A) posed Of (D) (Instr. 3, 4		Securiti Benefic Owned	Securities Fo Beneficially (D)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price			Transac		(111341. 4)	
Common	Stock			04/01	/2024	ļ		M		272	272 A		02 7,	7,779		D		
Common	Common Stock 04/01		/2024	2024		S <sup>(1)</sup>		272 D \$		\$137	.3 7,	7,507		D				
		Т										, or Ben ble secu		y Owned				
Derivative   Conversion   Date   Executive   Security   or Exercise   (Month/Day/Year)   if any		3A. Deeme Execution if any (Month/Day	Date,	Code (Instr.		on of		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	f g Security nd 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisabl		xpiration late	Title	Amount or Number of Shares					
Non- Qualified Stock	\$79.02	04/01/2024			M			272	(2)	0	1/31/2032	Common Stock	272	\$79.02	5,172		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. Additionally, Issuer policy restricts the Reporting Person from amending or otherwise modifying any 10b5-1 trading plan subsequent to adoption of the plan.
- 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-Fact 04/03/2024

\*\* 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.