FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average k	ourdon							

Check this box if no longer subject to 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 or Section 30(h) of the Investment Company Act of 1940

37 hours per response: 0.5

Name and Address of Reporting Person* <u>Grigoriadis Dimitri E.</u>					NE	2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC NBIX									5. Relationship of Reporting Pers (Check all applicable) Director				ssuer Owner
	. '\D	INDIA J									X	Office	er (give title v)	Other below	(specify				
(Last) (First) (Middle) NEUROCRINE BIOSCIENCES, INC. 12780 EL CAMINO REAL						3. Date of Earliest Transaction (Month/Day/Year) 01/12/2015								Chief Research Officer					
12700 EE CAMINO REAL					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)	EGO CA	1 0)2130											Lir	ne) X	Form	i filed by One	e Reporting Per	son
															Form Perso		e than One Re	oorting	
(City)	(St	ate) (Zip)																
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quirec	l, Dis	sposed o	f, or	Ben	eficia	lly O	wne	ed		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,		Transaction Disposed O			es Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Sec Ben Owr		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount (A) or (D) Pri		Price	1	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common Stock 01/12/2						015			S ⁽¹⁾		1,625	D \$2		\$28.38	3(2)	⁽²⁾ 78,683		D	
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 Date, if any (Month/Day/Yea	on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		ount			9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	of	mber ares					

Explanation of Responses:

- 1. Sale of 1,625 shares of common stock issued upon vesting of 3,250 restricted stock units on January 12, 2015 to cover payroll and withholding taxes, with the balance of the shares (1,625) maintained by the Reporting Person; the sale was affected by a broker pursuant to instructions set forth in a Rule 10b5-1 plan adopted by the Reporting Person and delivered to the broker on May 28, 2013.
- 2. Represents a weighted average sales price per share. The prices actually received ranged from \$27.28 to \$29.54. The Reporting Person has provided to the issuer, and will provide to any security holder of the issuer or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

Remarks:

Timothy P. Coughlin, By Power of Attorney

01/13/2015

** 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.