SEC Form 4	
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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

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

OMB APPROVAL								
OMB Number:	3235-0287							
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1. Nume and Address of Reporting Ferson			2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
LIUNS GARLA			NBIX]	X	Director	10% Owner			
(Loph) (First) (Middlo)					Officer (give title below)	Other (specify below)			
(Last) (First) (Middle) 12790 EL CAMINO REAL		(middie)	3. Date of Earliest Transaction (Month/Day/Year) 12/08/2004		CEO				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing	(Check Applicable			
SAN DIEGO	CA	92130		X	Form filed by One Repor	rting Person			
(City)	(State)	(Zip)			Form filed by More than Person	One Reporting			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	12/08/2004	12/08/2004	J ⁽¹⁾		6,500	D	\$45.87	620,223	D ⁽³⁾	
Common Stock	12/08/2004	12/08/2004	A ⁽²⁾		6,500	A	\$45.87	626,723	I ⁽⁴⁾	By Family Trust/Limited Liability Company

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

			-							1					
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/Year)	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y	7. Title Amour Securi Under Deriva Securi and 4)	nt of ties lying tive ty (Instr. 3	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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Transfer of 6,500 non-derivative securities from the Gary A. Lyons brokerage account to the Gary A. Lyons and Eryn H Lyons Family Trust.

2. Acquisition of non-derivative securities to Gary A. Lyons and Eryn H. Lyons Family Trust from Gary A Lyons brokerage account.

3. 482,442 non-derivative securities were held by the Reporting Person; 144,281 non-derivative securities were held indirectly by the GEL Limited Liability Company.

4. 475,942 non-derivative securities are held by the Reporting Person; 144,281 non-derivative securities are held indirectly by the GEL Limited Liability Company; 6,500 non-derivative securities are held indirectly by Gary A. Lyons and Eryn H. Lyons Family Trust

Remarks:

<u>Margaret E. Valeur-Jensen, By</u>

Power of Attorney

** Signature of Reporting Person Date

12/10/2004

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.