FORM 4

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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL				
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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

1. Name and Address of Reporting Person*  LYONS GARY A  (Last) (First) (Middle)  12780 EL CAMINO REAL  (Street)  SAN DIEGO CA 92130						Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [NBIX]  3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022  4. If Amendment, Date of Original Filed (Month/Day/Year)							6. I	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner     Officer (give title other (specify below)      6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person				
(City)	(S	tate) (	(Zip)			Form filed by More than One Reporting Person										9		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Code					Benefic	es ally Following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	Price	Transac (Instr. 3	ction(s)			(Instr. 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 D if any (Month/Day/	Date,	4. Transa Code (I 8)		of E		6. Date Exercisab Expiration Date (Month/Day/Year)		Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly Owr Fori Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisat		xpiration ate	Title	Amount or Number of Shares					
Non- Qualified Stock Option	\$84.95	05/18/2022			A		9,724		(1)	0:	5/18/2032	Common Stock	9,724	\$0.00	9,724		D	

## **Explanation of Responses:**

1. Option vests in 12 monthly installments beginning June 18, 2022.

## Remarks:

/s/ Darin Lippoldt, Attorney-in-05/20/2022 Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).