Instruction 1(b)

FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See 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* MOLLICA JOSEPH A				2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [NBIX]										IX Ch	eck all app X Direc	tionship of Reporting all applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	ner	
(Last) PO BOX	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/12/2014											below)		below)	
(Street) PRINCE (City)		-	08542 (Zip)		4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	e) X Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	ative	Se	curit	ies Ac	quire	d, D	isp	osed o	f, o	r Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)		Date	ransaction e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			I (A) or : 3, 4 and	Benefic	ies cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Cod	le V		Amount		(A) or (D)	Price	Transa	ction(s) and 4)			(111501.4)
Common Stock		12/12	12/12/2014				М	Τ		20,000	0	A	\$4.76	6 23	23,508(1)		D			
Common	Common Stock 12.		12/12	2/2014	2014		F			4,333		D	\$21.9	7 19	175(1)		D			
			Table II -									sed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea			Execution Date, if any		4. Transaction Code (Instr. 8)		n of		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		Security 14)	8. Price of Derivative Security (Instr. 5)		e s illy	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exerci	sable		xpiration ate	Title		Amount or Number of Shares					
Stock	\$4.76	12/12/2014			M			20,000	06/28/	2007	0:	5/28/2015		nmon	20,000	\$0	0		D	

Explanation of Responses:

1. The share issuance reported on Table I reflects shares issued upon the exercise of options granted on May 28, 2008, which, if unexercised, would have expired on May 28, 2015. 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 (\$4.76) was subtracted from the December 12, 2014 market close price (\$21.97), and this net amount (\$17.21) was then multiplied by the number of options (20,000), with the resulting amount then divided by the market close price to result in a net issuance of 15,667 shares to the optionee. The 4,333 shares underlying the remaining portion of the options are not available for reissuance, and no shares are sold into the market as part of the exercise in connection with a net issuance program.

Remarks:

Timothy P. Coughlin, By Power 12/15/2014 of Attorney

** 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.