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

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(Last) (First) (Middle) 12780 EL CAMINO REAL 3. Date of Earliest Transaction (Month/Day/Year)			Table I - Non-F	Derivative Securities Acquired, Disposed of, or Benefi	cially	Owned		
Name and Address of Reporting Ferson NEUROCRINE BIOSCIENCES INC [NBIX (Check all applicable) NEUROCRINE BIOSCIENCES INC [NBIX Director 10% Owner (Last) (First) (Middle) 12780 EL CAMINO REAL 3. Date of Earliest Transaction (Month/Day/Year) Chief Medical Officer (Street) 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable)	(City)	(State)	(Zip)				an One Reporting	
In Name and Address of Reporting Person NEUROCRINE BIOSCIENCES INC [NBIX] (Check all applicable) Director 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Chief Medical Officer				4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)			
NEUROCRINE BIOSCIENCES INC [NBIX (Check all applicable) Director 10% Owner X Officer (give title below) below) below)	· · ·	()	(Middle)			Chief Medica	l Officer	
	ROBERTS	EIRY		\$,	(Check	all applicable) Director 10% Owr Officer (give title Other (sp		

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following	(D) or Indirect	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	 Reported Transaction(s) (Instr. 3 and 4) 		(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 Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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				
Stock Option	\$81.05	02/07/2019		Α		66,673		(1)	02/07/2029	Common Stock	66,673	\$0.00	66,673	D	
Restricted Stock	(2)	02/07/2019		A		12,339		(3)	(3)	Common Stock	12,339	\$0.00	12,339	D	

Explanation of Responses:

1. Represents option of which 1/48th of the shares underlying the option becomes vested and exercisable on March 7, 2019 and an additional 1/48th of the shares underlying the option becomes vested and excercisable each month thereafter.

2. Each Restricted Stock Unit represents a contingent right to receive one share of the Issuer Common Stock.

3. The Restricted Stock Units will vest annually at 1/4 of the units vesting on each of February 7, 2020, February 7, 2021, February 7, 2022, and February 7, 2023.

Remarks:

/s/ Darin Lippoldt, Attorney-in-02/08/2019 Fact

** 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.

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