FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

0.5

hours per response:

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

1. Name and Address of Reporting Person*  OBrien Christopher Flint					NI	2. Issuer Name and Ticker or Trading Symbol  NEUROCRINE BIOSCIENCES INC  NBIX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specif					/ner	
(Last) (First) (Middle) 12780 EL CAMINO REAL						3. Date of Earliest Transaction (Month/Day/Year) 10/02/2017								Х	X Officer (give the Officer Specify below)  Chief Medical Officer					
(Street) SAN DII			92130 (Zip)		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	′					
		Tabl	le I - No	n-Deriv	/ative	e Sec	uriti	es Ac	quired,	Dis	sposed o	f, or Be	nefic	ially	Owned	ł				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Exe r) if ar	ıy	ned n Date, ay/Year)			4. Securition Disposed	es Acquired Of (D) (Insti				es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	!	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 10/02/20						017		М		6,925	A	\$8	.65	55	5,898		D			
Common Stock 10/02/20					2017	017		S <sup>(1)</sup>		6,925	D	\$61.	.04(2)	48	3,973		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. Deen Executio if any (Month/E	n Date,	4. Transa Code ( 8)		on of		6. Date Ex Expiration (Month/Da	Dat	e	Amount of		D Sc (li	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	per						
Non- Qualified Stock	\$8.65	10/02/2017			M			6,925	(3)		01/10/2023	Common Stock	6,92	25	\$8.65	70,341		D		

## **Explanation of Responses:**

- 1. The disposition reported in this Form 4 was effected by a broker pursuant to instructions set forth in a Rule 10b5-1 trading plan adopted by the Reporting Person at least 90 days prior to the transaction date in Box 3 above. Additionally, Issuer policy restricts the Reporting Person from amending, canceling, suspending or otherwise modifying any 10b5-1 trading plan subsequent to adoption of the plan.
- 2. Represents a weighted average sales price per share. These shares were sold in multiple transactions at prices ranging from \$60.40 to \$61.93. 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.
- 3. Option granted January 10, 2013 and vested over 4 years.

## Remarks:

/s/Darin Lippoldt, Attorney-in-

<u>Fact</u>

\*\* Signature of Reporting Person Date

10/03/2017

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

- \* 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.