FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
OMB Number:	3235-0

287 Estimated average burden hours per response: 0.5

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

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1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC NBIX								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Sandrock Alfred				l_1									X Directo	r	10% C	wner		
					Ľ										(give title		(specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/20/2016								below) below)				
12780 El	L CAMINO	REAL			05	/20/2	016											
					- 4. I	f Ame	ndment, I	Date (of Original	Filed	(Month/Day	y/Year)			oint/Group Fil	ing (Check A	plicable	
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(City)	(5	toto)	(7in)											Persor		ian one rep	or unig	
(City)	(5	tate)	(Zip)															
		Tal	ole I - Non	-Deriv	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Ber	eficial	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Code (Instr. 5)			d (A) or r. 3, 4 and		es Forn ally (D) o	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)		(Instr. 4)	
			Table II - I	Deriva	ative	Seci	urities	Δca	wired [)isn	osed of	or Bene	ficially	Owned				
											convertit			Ownea				
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	ate, T	4. Transactior Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares					
Stock Option	\$47.89	05/20/2016			A		15,000		06/20/201	6 ⁽¹⁾	05/20/2026	Common Stock	15,000	\$0.00	15,000	D		

Explanation of Responses:

1. Option vests in 12 equal monthly installments beginning June 20, 2016.

Remarks:

/s/ Darin Lippoldt, Attorney-In-05/24/2016

Fact

** Signature of Reporting Person

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.