FORM 4

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

Washington, D	D.C. 20549	
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STATEMENT	OF	CHANG	GES IN	I BEN	EFICIAL	OWN	ERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  SHERWIN STEPHEN A					<u>N</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC NBIX										all applic Directo	able) r	g Pers	ion(s) to Iss	wner
(Last) 12780 EI	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/19/2021										officer below)	(give title		Other (: below)	specify
(Street) SAN DII			92130 (Zip)		- 4. li									6. l	e)	lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transc Date (Month/L					2A. Deemed Execution Date, if any (Month/Day/Year)			е,	Transaction Disposed Code (Instr. 5)		ties Acquire I Of (D) (Ins	5. Amoun Securities Beneficia Owned Fo Reported		s Fo ally (D) ollowing (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code V	,	Amount	mount (A) or (D)		1	Transaction(s) (Instr. 3 and 4)				(IIISU. 4)	
Table II - Deriva (e.g., p													or Bene ble secu		/ Ow	vned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)				ransaction of ode (Instr. Derivati		tive ties red sed	Expiration Date (Month/Day/Yea		ate		7. Title an Amount o Securities Underlyin Derivative (Instr. 3 ar	f g Security	Der	Price of rivative curity str. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	Amount or Number of Shares	1					
Non- Qualified Stock Option	\$92.35	05/19/2021			A		8,833		06/1	19/2021 <sup>(1)</sup>	0	5/19/2031	Common Stock	8,833	\$	\$0.00	8,833	3	D	

## Explanation of Responses:

1. Option vests in 12 equal monthly installments beginning June 19, 2021.

## Remarks:

/s/ Darin Lippoldt, Attorney-in-05/20/2021

**Fact** 

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.