FORM 4

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

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL							
OMB Number: 3235-028							
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* <u>Coughlin Timothy P</u>				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						
(Last) (First) (Middle) NEUROCRINE BIOSCIENCES, INC. 12780 EL CAMINO REAL		0	3. Date of Earliest Transaction (Month/Day/Year) 08/25/2011						6	X Officer (give title Other (specify below)  VP and Chief Financial Officer								
(Street) SAN DII			92130 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						ne) X	idual 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																	
Date			. Transactio Date Month/Day/	Executi		Date,	Transaction Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 a		and 5) Securities Beneficia Owned Fo		Foi lly (D)	Form: (D) or	m: Direct I or Indirect I Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	mount (A) or (D)		- 1	Reported Transaction (Instr. 3 au	ion(s)			(Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative   Conversion   Date		Date Exe Month/Day/Year) if a	3A. Deemed Execution Date if any (Month/Day/Yea	Code (		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Share			(Instr. 4)			
Stock Option <sup>(1)</sup>	\$5.76	08/25/2011		A		125,000		09/25/2011	08	8/25/2021	Common Stock	125,00	0	\$5.76	125,00	00	D	

## Explanation of Responses:

1. Represents option of which 1/36th of the shares underlying the option becomes vested and exercisable on September 25, 2011, an additional 1/36th of the shares underlying the option becomes vested and exercisable each month thereafter.

## Remarks:

Margaret E. Valeur-Jensen, By Power of Attorney

08/29/2011

\*\* 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.