## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANG	GES IN BI	<b>ENEFICIAL</b>	OWNERSH	Р

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	urden							
hours ner resnonse.	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

					01.56	ection 3	o(II) C	n the i	nvesune	ent Co	mpany Act o	1 1940								
Name and Address of Reporting Person *     Lippoldt Darin				<u>NE</u>	2. Issuer Name and Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC [								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner							
				INDI	NBIX ]							X		er (give title		Other (	specify			
(Last)	(F	irst) (1	Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)									A below) below)  Chief Legal Officer					
12780 EL CAMINO REAL			04/2	04/24/2020										Ciller Le	gai Oi	incei				
(Street)				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
SAN DII	EGO C	A 9	2130											X	· ·					
														Form filed by More than One Reporting Person						
(City)	(S	tate) (2	Zip)																	
		Table	I - No	n-Deriva	tive \$	Secui	rities	Acc	uired	, Dis	posed of	, or E	Benef	icially	y Own	ed				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)			Execution Date		ate,	Transaction Disposed C Code (Instr. 5)		es Acquired (A) Of (D) (Instr. 3, 4		and Securi Benefi		ties cially I Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	(A) o (D)	r Pri	ce	Transa	action(s) 3 and 4)			(m3u. 4)			
Common Stock 04/24/20				2020				S (1)		1,934	D	99	\$ 0.4912 (2)	26,021 (3)			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)	erivative   Conversion   Date   Execution Date, ecurity   or Exercise   (Month/Day/Year)   if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispe	rivative curities quired or sposed (D) str. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of rivative curity str. 5)	tive derivative ty Securities	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er						

## **Explanation of Responses:**

- 1. Sale of 1,934 shares of common stock issued upon vesting of 3,675 performance restricted stock units on April 24, 2020 to cover withholding taxes, with the balance of the shares (1,741) maintained by the Reporting Person; 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 60 days prior to the transaction date in Box 3 above. Additionally, Issuer policy restricts the Reporting Person from amending 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 \$97.56 to \$101.14. 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. Includes 156 shares acquired under the Neurocrine Biosciences 2018 Employee Stock Purchase Plan on February 28, 2020.

## Remarks:

/s/ Darin Lippoldt

04/28/2020

\*\* 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.