## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

I

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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

OMB Number: 3235-0287										
Estimated average burden										
hours per response:	0.5									

1. Name and Address of Reporting Person <sup>*</sup> SHERWIN STEPHEN A					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>NEUROCRINE BIOSCIENCES INC</u> [ NBIX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
													C Directo	or		10% Ov	vner		
(Last)	(Last) (First) (Middle)												Officer below)	(give title		Other (s below)	specify		
CELL GENESYS, INC.					3. Date of Earliest Transaction (Month/Day/Year)														
, i i i i i i i i i i i i i i i i i i i					05/26/2	05/26/2004													
500 FORBES BLVD.																			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH	SAN C	٨	94080									2	K Form f	iled by One	e Repor	ting Perso	n		
FRANCISCO CA 94080														Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)																
		Tal	ole I - Nor	n-Deriva	ative Se	curities Aco	quired	, Dis	posed	of, o	r Bene	eficiall	y Owned	I					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					ay/Year)	Execution Date,		Transaction Dis Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	e v	Amount	t	(A) or (D) Pri		Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
						urities Acqu s, warrants,							Owned						
1. Title of	2.	3. Transaction	3A. Deeme		ansaction			Exercisable and 7. Title and Am				9. Number of		10. Ownership	11. Nature				

Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ive ies ed ed nstr.	6. Date Exerc Expiration Da (Month/Day/Y	ate	of Securiti Underlyin Derivative (Instr. 3 ar	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option <sup>(1)</sup>	\$57.51	05/26/2004		Α		12,000		06/26/2004	05/26/2014	Common Stock	12,000	\$57.51	12,000	D	

Explanation of Responses:

1. Represents option of which 1/12th of the shares underlying the option becomes vested and exercisable on June 26, 2004, an additional 1/12th of the shares underlying the option becomes vested and exercisable each month thereafter.

**Remarks:** 

Margaret E. Valeur-Jensen, by Power of Attorney

05/28/2004

\*\* 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.