Edgar Filing: Grigoriadis Dimitri E. - Form 4

Grigoriadis	Dimitri E.									
Form 4 January 14, 1	2013									
								OMB A	PPROVAL	
FORM	4 UNITED	STATES		RITIES A			COMMISSION		3235-028	37
Check th			,,,,		, 21012			Expires:	January 3	
if no lon subject to Section 2 Form 4 c	o SIAIEN 16. or	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated burden hou response	2005 ed average nours per		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17((a) of the F	Public U	Itility Hol	ding Co		nge Act of 1934, of 1935 or Section 940	on		
(Print or Type	Responses)									
1. Name and Address of Reporting Person * 2 Grigoriadis Dimitri E. System				er Name an			5. Relationship of Reporting Person(s) to Issuer			
			NEUROCRINE BIOSCIENCES INC [NBIX]				(Check all applicable)			
(Last)	(First) (I			3. Date of Earliest Transaction			Director 10% Owner X Officer (give title Other (specify			
				(Month/Day/Year) 01/10/2013			below) Chief Research Officer			
(Street) 4.				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
				iled(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
SAN DIEG	O, CA 92130						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution l any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	Securities	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Damindar: Dar	port on a separate line	for each clo	oss of sec	urities bene	ficially on	ned directly	or indirectly			
Kenninder, Kej	port on a separate line		155 01 500		Perso inforr requi	ons who res nation cont red to resp ays a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					sposed of, or convertible	Beneficially Owned securities)	1		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (1)	\$ 8.65	01/10/2013		А	75,000	02/10/2013	01/10/2023	Common Stock	75,000
Restricted Stock Units	<u>(2)</u>	01/10/2013		А	13,000	(3)	(3)	Common Stock	13,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
Grigoriadis Dimitri E. NEUROCRINE BIOSCIENCES, INC. 12780 EL CAMINO REAL SAN DIEGO, CA 92130			Chief Research Officer				
Signatures							
Margaret E. Valeur-Jensen, By Power of Attorney	f	01/14/2013					
**Signature of Reporting Person		Da	te				

Explanation of Responses:

- * 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).
- (1) Represents option of which 1/48th of the shares underlying the option becomes vested and exercisable on February 10, 2013, an additional 1/48th of the shares underlying the option becomes vested and exercisable each month thereafter.
- (2) Each restricted stock unit represents a contingent right to receive one share of Neurocrine Common Stock.
- (3) The restricted stock units will vest annually at 1/4 of the units vesting on January 10, 2014, January 10, 2015, January 10, 2016 and January 10, 2017, respectively.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.