

NEUROCRINE BIOSCIENCES INC  
 Form 4  
 September 20, 2006

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2005  
 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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 HAWRAN PAUL W

2. Issuer Name and Ticker or Trading Symbol  
 NEUROCRINE BIOSCIENCES INC [NBIX]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)  
 09/18/2006

\_\_\_\_ Director  
 \_\_\_\_ Officer (give title below)  10% Owner  
 Other (specify below)  
 Senior Advisor

NEUROCRINE BIOSCIENCES, INC., 12790 EL CAMINO REAL

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

SAN DIEGO, CA 92130

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Ownership (Instr. 4) |     |       |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|-----------------------------------|-----|-------|
|                                 |                                      |  |                                | (A) or (D)  | Code  | V  | Amount                            | (D) | Price |

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

**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 control number.**

SEC 1474 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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

Edgar Filing: NEUROCRINE BIOSCIENCES INC - Form 4

| 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 |
| Employee Stock Option (right to buy) | \$ 36.79                                 | 09/18/2006           | J <sup>(1)</sup> |   |                  |     | 03/07/2002       | 02/07/2012      | Common Stock | 40,000                     |
| Employee Stock Option (right to buy) | \$ 48.51                                 | 09/18/2006           | J <sup>(1)</sup> |   |                  |     | 06/22/2003       | 05/22/2013      | Common Stock | 35,000                     |
| Employee Stock Option (right to buy) | \$ 57.51                                 | 09/18/2006           | J <sup>(1)</sup> |   |                  |     | 06/26/2004       | 05/26/2014      | Common Stock | 25,000                     |
| Employee Stock Option (right to buy) | \$ 40.39                                 | 09/18/2006           | J <sup>(1)</sup> |   |                  |     | 03/18/2005       | 02/18/2015      | Common Stock | 25,000                     |
| Employee Stock Option (right to buy) | \$ 60.95                                 | 09/18/2006           | J <sup>(1)</sup> |   |                  |     | 02/19/2006       | 01/19/2013      | Common Stock | 20,000                     |

## Reporting Owners

| Reporting Owner Name / Address   | Relationships |           |         |                |
|--|---------------|-----------|---------|----------------|
|  | Director      | 10% Owner | Officer | Other          |
| HAWRAN PAUL W<br>NEUROCRINE BIOSCIENCES, INC.<br>12790 EL CAMINO REAL<br>SAN DIEGO, CA 92130 |               |           |         | Senior Advisor |

## Signatures

Timothy P. Coughlin, By Power of  
Attorney

09/20/2006

\_\_Signature of Reporting Person

Date

## 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) Forfeited and cancelled as part of Reporting Person's Amended and Restated Employment Agreement dated September 18, 2006

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.