Hove Anders D Form 3/A January 05, 2010

#### FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF 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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement NEUROCRINE BIOSCIENCES INC [NBIX] Hove Anders D (Month/Day/Year) 12/22/2009 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O VENROCK 01/04/2010 (Check all applicable) ASSOCIATES,, 30 ROCKEFELLER PLAZA. \_\_X\_\_ 10% Owner Director **ROOM 5508** Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting NEW YORK, NYÂ 10112 Person Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) (Instr. 5) Form: Direct (D) or Indirect (Instr. 5) Common Stock Ι By fund (1)4,044,789 Common Stock 739,900 I By fund (2)Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

#### Edgar Filing: Hove Anders D - Form 3/A

1. Title of Derivative Security (Instr. 4)

**Expiration Date** (Month/Day/Year)

2. Date Exercisable and 3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of Derivative Security

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Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Exercisable

**Expiration Title** Date

Amount or Number of Shares

Security: Direct (D) or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Hove Anders D

C/O VENROCK ASSOCIATES, 30 ROCKEFELLER PLAZA, ROOM 5508 NEW YORK, NYÂ 10112

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**Signatures** 

/s/ David L. Stepp, attorney-in-fact

01/05/2010

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 5(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).

Consists of shares of common stock held directly by Venrock Healthcare Capital Partners, L.P. ("VHCP LP"). VHCP Management, LLC ("VHCP Management") is the general partner of VHCP LP and may be deemed to beneficially own these shares. Mr. Hove and Bryan **(1)** Roberts are the managing members of VHCP Management and may be deemed to beneficially own these shares. The reporting person disclaims beneficial ownership of these shares except to the extent of his pecuniary interest therein.

Consists of shares of common stock held directly by Venrock Co-Investment Holdings, LLC ("Venrock Co-Investment"). VHCP Management is the manager of Venrock Co-Investment and may be deemed to beneficially own these shares. Messrs. Hove and Roberts are the managing members of VHCP Management and may be deemed to beneficially own these shares. The reporting person disclaims beneficial ownership of these shares except to the extent of his pecuniary interest therein.

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This amendment is being filed solely to file the Power of Attorney as Exhibit 24.1 to the origina

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.

Reporting Owners 2