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NEUROCR	INE BIOSCIE	NCES INC										
July 21, 201	5											
FORM	4				~						PPROVAL	
. •	• • UNITH	ED STATES				ND EXC D.C. 205		NGE C	COMMISSION	OMB Number:	3235-0287	
Check th	aer			C						Expires:	January 31,	
subject to					N BENEFICIAL OWNERSHIP OF				Estimated average			
Section Form 4 c		SECURITIES								burden hou response	rs per 0.5	
Form 5 obligatio		-						-	e Act of 1934,	·		
may con	tinue. Section		Public Ut of the In (•		•	• •		1935 or Section	n		
<i>See</i> Instr 1(b).	uction	50(II)) of the m	vestin	JIII V	company	ACI	01 1 94	0			
	.											
(Print or Type)	Responses)											
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of Report								Reporting Pers	eporting Person(s) to			
OBrien Christopher Flint Symbol NEURO INC [NF							NOE	C	Issuer			
				OCRINE BIOSCIENCES BIX1					(Check all applicable)			
				BIA								
(Last)	(First)	(Middle)	3. Date of	-	t Tra	insaction			Director		Owner	
, <i>,</i> ,	× ,	. ,	3. Date of (Month/D	Earlies		insaction			Director X Officer (give below)	titleOthe	er (specify	
, <i>,</i> ,	CAMINO REA	. ,	3. Date of (Month/D 07/20/20	Earlies Day/Year 015	r)				Director X Officer (give below) Chief	title Othe below) Medical Office	er (specify er	
, <i>,</i> ,	× ,	. ,	3. Date of (Month/D 07/20/20 4. If Ame	E Earlies Day/Year 015 ndment,	r) , Dat	e Original			Director X Officer (give below) Chief 6. Individual or Jo	title Othe below) Medical Office	er (specify er	
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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.

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 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8		5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration D	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amc or Num of Sł	
Non-Qualified Stock Option	\$ 5.76	07/20/2015		Μ	V		11,250	(2)	08/25/2021	Common Stock	11,2	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
OBrien Christopher Flint 12780 EL CAMINO REAL SAN DIEGO, CA 92130			Chief Medical Officer					
Signatures								
/s/ Darin Lippoldt, Attorney-In-Fact		07/21/2015						
**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).
- 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
 (1) by the Reporting Person at least 90 days prior to the transaction date in Box 3 above. Additionally, Issuer policy restricts the Reporting Person from amending, canceling, suspending or otherwise modifying any 10b5-1 trading plan subsequent to adoption of the plan.
- (2) The option was granted August 25, 2011 and vested in 36 equal monthly installments beginning September 25, 2011.

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.