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BIOMARIN PHARMACEUTICAL INC

Form 4

November 03, 2014

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

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response... 0.5

Check this box if no longer subject to Section 16.

Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. *See* Instruction

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

1(b).

Common

Stock

10/30/2014

(Print or Type Responses)

1. Name and Davis Geor	Address of Reporting rge Eric	Symbo BIOM	uer Name and Ticker or Trading l MARIN PHARMACEUTICAL BMRN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
(Last) C/O BIOM PHARMA DIGITAL	ARIN CEUTICAL INC.	(Month 10/30	of Earliest Transaction n/Day/Year) /2014	Director 10% Owner _X Officer (give title Other (specify below) SVP, General Counsel									
	(Street)		mendment, Date Original Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)									
NOVATO,	CA 94949	T HCG(IV	ional Day, Teat)	_X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person									
(City)	(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)	Execution Date, if any (Month/Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price	Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)									
Stock	10/30/2014	10/30/2014	M 15,000 A \$ 26.4	49 79,426 D									

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

10/30/2014

S

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D

83.1953 64,426

\$

(1)

15,000 D

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number.

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. Transactic Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisals Expiration Date (Month/Day/Year		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Stock Option (right to buy) Common Stock	\$ 83.1953	10/30/2014	10/30/2014	M	15,000	11/12/2011(2)	05/11/2021	Common Stock	15,00

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Davis George Eric C/O BIOMARIN PHARMACEUTICAL INC. 105 DIGITAL DRIVE NOVATO, CA 94949

SVP, General Counsel

Signatures

/s/ Laura Randall Woodhead, Attorney-in-Fact

11/03/2014

Date

**Signature of Reporting Person

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 price in Column 4 is a weighted average price. The prices actually received ranged from \$83.27 to \$83.18. The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at
- (1) provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.
- (2) Original option grant vests 6/48ths on November 12, 2011 and 1/48th on the 12th day of every month thereafter
- (3) Reflects the number of stock options that remain outstanding from this specific stock option grant following the reported transaction.

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.

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