**FUCHS HENRY J** Form 4

June 06, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

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Estimated average

**OMB APPROVAL** 

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Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* **FUCHS HENRY J** 

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

**BIOMARIN PHARMACEUTICAL** 

3. Date of Earliest Transaction

INC [BMRN]

(Check all applicable)

(Last) (First) (Middle)

(Month/Day/Year)

Director 10% Owner Other (specify X\_ Officer (give title

04/30/2018

below)

President, Worldwide R&D

C/O BIOMARIN PHARMACEUTICAL INC., 770 LINDARO ST.

> (Street) 4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

SAN RAFAEL, CA 94901

Stock

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 7. Nature of Transaction(A) or Disposed of (D) Indirect Security (Month/Day/Year) Execution Date, if Securities Ownership (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Direct Beneficial (Month/Day/Year) (Instr. 8) Owned (D) or Ownership Indirect (I) Following (Instr. 4) Reported (Instr. 4) (A) Transaction(s) or (Instr. 3 and 4) Code V (D) Price Amount Common \$ 04/30/2018(1) 04/30/2018 309 157,101 <sup>(2)</sup> D Α A Stock 68.782 Common 06/04/2018 06/04/2018 F 1.934 \$ 92.07 155,167 D D

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

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	on Date, if TransactionNumber Expiration Date Code of (Month/Day/Year)		Expiration Date Amou		int of	Derivative	J	
Security	or Exercise		any			Year)	Underlying		Security	,	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities		(Instr. 5)	]
	Derivative			Securities Acquired			(Instr		3 and 4)		(
	Security										J
	-				(A) or						J
					Disposed						-
				of (D) (Instr. 3,							(
					4, and 5)						
									Amount		
									Amount		
						Date Expiration Exercisable Date	Expiration	Title	or Number		
								of			
				C-1- 1	7 (A) (D)						
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FUCHS HENRY J C/O BIOMARIN PHARMACEUTICAL INC. 770 LINDARO ST. SAN RAFAEL, CA 94901

President, Worldwide R&D

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

## **Signatures**

/s/ Laura Randall Woodhead, Attorney-in-Fact 06/06/2018

\*\*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) Represents shares acquired by the reporting person on April 30, 2018, pursuant to the issuer's Employee Stock Purchase Plan.
- Amount of securities beneficially owned has been adjusted from the reporting person's prior report to: a) add 139 shares reported as acquired in the Form 4 Amendment filed with the S.E.C. on 4/26/2018; and b) subtract 23 shares reported as disposed of in the Form 4 Amendment filed with the S.E.C. on 4/27/2018.

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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