Edgar Filing: Davis George Eric - Form 4

Davis Georg	e Eric										
Form 4	_										
May 10, 201	3										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check the	is box		v v ac	, mington,	D.C. 20	547				January 31,	
if no long		IENT OF	CHAN	GES IN	BENEF	ICIA	LOW	NERSHIP OF	Expires:	2005	
	subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.5		
	Form 4 or										
Form 5	Filed pur	suant to S	ection 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,	·		
obligation may cont				•	•	· ·		1935 or Section	n		
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type F	Responses)										
(I fine of Type I	(esponses)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Pers	on(s) to			
Davis George Eric Symbol							0	Issuer			
BIOMARIN PHARMACEUTICAL							x all applicable)				
INC [BMRN] (Che							(Check				
(Last)	(First) (M	/liddle)	3. Date of	Earliest Tr	ansaction			Director		Owner	
			(Month/Day/Year)					XOfficer (give titleOther (specify below) below)			
C/O BIOMA		105	05/08/2013					· · · · · · · · · · · · · · · · · · ·	General Counse	el	
DIGITAL D	EUTICAL INC.,	105									
DIGITALL											
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
	Filed(Month/Day/Year) Applicable Line)						_X_ Form filed by C	One Reporting Person			
NOVATO,	CA 94949							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi		-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Execution any	1 Date, 1f	Transactic Code				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(instr. 5)		(Month/Day/Year)							Indirect (I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Cod V	A	or	D.'	(Instr. 3 and 4)			
Common				Code V		(D)	Price \$				
Stock	05/08/2013	05/08/2	013	F	1,664	D	ф 65.32	45,394	D		
Stoon							00.02				

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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	05/10	0/2013						
<u>**</u> Signature of Reporting Person	D	ate						

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).

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.