Edgar Filing: Davis George Eric - Form 4

| Form 4 | | | | | | | | | | | |
|--|--|------------|--|--|------------|--------|---|--|--|---------------------|--|
| March 07, 20 | ГЛ | STATES | | | | | NGE C | COMMISSION | OMB | PROVAL 3235-0287 | |
| Check thi | is box | | Was | shington, | D.C. 20 | 549 | | | Number: | | |
| if no long subject to Section 1 Form 4 or | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Expires:January 31,Expires:2005Estimated averageburden hours perresponse0.5 | | | | |
| Form 5 obligatior may conti <i>See</i> Instru 1(b). | ns Section 17(a |) of the l | Public U | | ling Con | npany | y Act of | e Act of 1934, 71935 or Section 0 | n | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Davis George Eric | | | 2. Issuer Name and Ticker or Trading Symbol BIOMARIN PHARMACEUTICAL | | | | - | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | INC [BMRN] | | | | | (Check all applicable) | | | | |
| (Last) (First) (Middle) C/O BIOMARIN PHARMACEUTICAL INC., 770 LINDARO ST. | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2018 | | | | | Director 10% Owner X Officer (give title Other (specify below) EVP, General Counsel | | | |
| LINDARO | | | 4 If Ama | ndmant Da | ta Oniaina | 1 | | 6 Individual on Ia | int/Crown Filin | o (Chaala | |
| | | | | Amendment, Date Original (Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| | | (Zin) | | | | | | Person | | | |
| (City) | (State) (| Zip) | Tabl | e I - Non-D | | | - | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | n Date, if | 3. Transactic Code (Instr. 8) Code V | (Instr. 3, | ispose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 03/05/2018(1) | 03/05/2 | 018 | S | 2,105 | D | \$ 79.04 | 90,089 | D | | |

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. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna 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. 770 LINDARO ST. SAN RAFAEL, CA 94901 | | | EVP, General Counsel | | | | |
| Signatures | | | | | | | |
| /s/ Laura Randall Woodhead, Attorney-in-Fact | 03/07 | 7/2018 | | | | | |
| <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).
- (1) Trade made pursuant to a 10b5-1 plan executed on June 9, 2017.

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.