Edgar Filing: Ajer Jeffrey Robert - Form 4/A

Ajer Jeffrey Form 4/A											
April 27, 201	1 /								omb af	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 verage rs per 0.5	
Form 5 obligation may cont See Instru 1(b).	ns Section 17(a inue. action	a) of the l	Public U		ling Con	ipany	Act of	e Act of 1934, E 1935 or Section 0	n		
(Print or Type I	Responses)										
1. Name and A Ajer Jeffrey	Person [*]	2. Issuer Name and Ticker or Trading Symbol BIOMARIN PHARMACEUTICAL INC [BMRN]					5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
(Last) C/O BIOMA PHARMAC DIGITAL D	ARIN EUTICAL INC.,	1iddle) , 105	3. Date of (Month/D 03/22/20	-	ansaction			Director X Officer (give below) EVP, Chief		Owner or (specify Officer	
Fi				4. If Amendment, Date Original Filed(Month/Day/Year) 03/26/2018				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NOVATO,	CA 94949							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8)	(Instr. 3,	sposed 4 and (A) or	d of (D) 5)	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	03/22/2018	03/22/2	018	Code V F	Amount 3,598 (1)	(D) D	Price \$ 81.36	56,555	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
Repo	rting C	owners	Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owner Name / Address	Relationships						
I State and the state	Director	10% Owner	Officer	Other			
Ajer Jeffrey Robert C/O BIOMARIN PHARMACEUTICAL INC., 105 DIGITAL DRIVE NOVATO, CA 94949			EVP, Chief Commercial Officer				
Signatures							
/s/ Laura Randall Woodhead, Attorney-in-Fact	04/27	/2018					
**Signature of Reporting Person	Da	te					

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).
- This amendment is being filed solely to correct an administrative error in the original filing regarding the number of shares reported as (1) forfeited.

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.