## Edgar Filing: Davis George Eric - Form 4

Form 4	-									
March 05, 2										
FORM	14 <sub>UNITE</sub>	D STATES	SECUE	RITIES A	ND EX(	THA	NGE C	OMMISSION		PROVAL
		DUATE		shington,					OMB Number:	3235-0287
Check th if no lon	ger								Expires:	January 31, 2005
subject to STATEMENT OF CHAN Section 16. Form 4 or				GES IN BENEFICIAL OW SECURITIES					Estimated a burden hour response	verage
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 1	7(a) of the	Public U		ding Com	ipany	Act of	e Act of 1934, 1935 or Section 0	1	
(Print or Type	Responses)									
1. Name and A Davis Geor	Address of Reporti ge Eric	ng Person <u>*</u>	Symbol	r Name <b>and</b> ARIN PHA MRN]				5. Relationship of Issuer (Check	Reporting Pers	
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			Director 10% Owner X Officer (give title Other (specify		
C/O BIOM PHARMAG LINDARO	CEUTICAL IN	C., 770	(Month/E 03/01/2	-				below)	below) General Counse	
			Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SAN RAFA	AEL, CA 94901							Form filed by M Person	ore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)		nsaction Date 2A. Deemed h/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/01/2019(1)			Code V A	Amount 11,853 (2) (3)	(D) A	Price \$ 0	(Instr. 3 and 4) 84,587	D	
Common Stock	03/01/2019			F	840	D	\$ 94.76	83,747	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 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)	(Month/Day/Year) vative urities uired or oosed D) r. 3,		Secur	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**

<b>Reporting Owner Name / Address</b>	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/ Eric Fleekop,	03/05/2019
Attorney-in-Fact	03/03/2019

\*\*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) Transaction Date is the date that the Issuer's Board of Directors' Compensation Committee Chair certified that the reporting person earned the Restricted Stock Units (RSUs), which are convertible into shares of the Issuer's Common Stock on a 1:1 basis.
- Represents the total number of RSUs earned pursuant to a calculation set forth in the performance-based RSU awards previously granted
  (2) under the Issuer's 2017 Equity Incentive Plan based on the level of the Issuer's total adjusted net product revenues for the fiscal year ended December 31, 2018 as set forth in the Issuer's audited financial statements.
- (3) Although earned, the RSUs only vest according to the following schedule: 1/3 vests on each of March 15, 2019, 2020 and 2021, so long as the reporting person remains continuously employed with the Issuer through that date, subject to earlier vesting upon certain events.

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.