Edgar Filing: FUCHS HENRY J - Form 4

FUCHS HEN Form 4	NRY J									
March 04, 20)13									
								OMB AF	PROVAL	
	UNITED	STATES SECU Wa	RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type F	Responses)									
1. Name and A FUCHS HE	ddress of Reporting I NRY J	Symbol	•				5. Relationship of Reporting Person(s) to Issuer			
	BIOM INC [E	ARIN PHA BMRN]	ARMAC	EUT.	ICAL	(Chec	(Check all applicable)			
(Last) C/O BIOMA PHARMAC DIGITAL D	ARIN EUTICAL INC.,	(Month/ 03/01/2	of Earliest Tr Day/Year) 2013	ransaction			Director X Officer (give below) EVP, Chi		Owner er (specify icer	
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NOVATO,	CA 94949							fore than One Re		
(City)	(State)	(Zip) Tal	ole I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3, Amount	(A) or	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	03/01/2013	03/01/2013	F	1,908	D	\$ 59.61	44,589	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)

Edgar Filing: FUCHS HENRY J - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	int of lying	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		
FUCHS HENRY J C/O BIOMARIN PHARMACEUTICAL INC. 105 DIGITAL DRIVE NOVATO, CA 94949			EVP, Chief Medical Officer			
Signatures						
/s/ Laura Randall Woodhead, Attorney-in-Fact	03/04/2013					
**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).

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.