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BIOMARIN PHARMACEUTICAL INC

Form 5

February 14, 2014

1 cordary 14	, 2017										
FORM	1 5							OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0362		
Check th no longer		Wa	ashington, I	D.C. 205			Expires:	January 31,			
to Section Form 4 o	n 16.	NUAL STATEM	ENT OF C	HANGE	S IN	BENEFI	CIAL	Estimated a	2005 verage		
5 obligati may cont	ions inue.		OWNERSHIP OF SECURITIES					burden hours per response			
See Instruction 1(b). Form 3 H Reported Form 4 Transaction Reported	Filed put Holdings Section 176	rsuant to Section (a) of the Public U 30(h) of the I	Jtility Holdi	ng Comp	any A	Act of 19					
	Address of Reporting	Person * 2. Issuer	Name and Ti	cker or Tra	ading		Relationship of I	Reporting Pers	on(s) to		
BAFFI RO	BERT	Symbol RIOM	ARIN PHA	DMACE	I ITIC		Issuer				
			BMRN]	RWACE	.0110	AL	(Check all applicable)				
(Last)	(First) (nent for Issuer	's Fiscal Y	ear En		Director 10% Owner X Officer (give title Other (specify				
		12/31/	Day/Year) 2013			belo	ow)	below) hnical Operati			
C/O BIOM	ARIN CEUTICAL INC.	â 105					LVI, ICC	innear Operati	Olis		
DIGITAL 1		,A 103									
	(Street)	4. If An	nendment, Date	e Original		6. I	ndividual or Joi	nt/Group Repo	orting		
		Filed(M	onth/Day/Year)				(check	applicable line)			
							(ciicii	approuere inte			
NOVATO,	CA 94949					X	Form Filed by O	ne Reporting Pe	erson		
							Form Filed by M				
(City)	(State)	(Zip) Tal	ble I - Non-De	rivative S	ecuriti	es Acquire	d, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)		(D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and	f 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Amount	or (D)	Price	4)				
Common Stock	05/14/2013(1)	Â	G	1,912	D	\$ 0	60,350	D	Â		
Common Stock	05/14/2013	Â	G	1,912	A	\$ 0	10,955	I	Shares held by		

Baffi Family

									Trust
Common Stock	10/31/2013(2)	Â	A	92	A	\$ 27.9055	60,422	D	Â
Common Stock	11/13/2013(3)	Â	G	92	D	\$ 0	60,350	D	Â
Common Stock	11/13/2013	Â	G	92	A	\$0	11,047	I	Shares held by Baffi Family Trust
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.			Persons v contained the form of	SEC 2270 (9-02)					

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address		Relationships							
F-	Director	10% Owner	Officer	Other					
BAFFI ROBERT C/O BIOMARIN PHARMACEUTICAL INC 105 DIGITAL DRIVE NOVATO, CA 94949	C. Â	Â	EVP, Technical Operations	Â					
Signatures									
/s/ Laura Randall Woodhead, Attorney-in-Fact	02/14/	/2014							
**Signature of Reporting Person	Da	ite							

Reporting Owners 2

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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) On May 14, 2013 the reporting person gifted 1,912 shares of Common Stock to his family trust. The reporting person is the trustee.
- (2) The reporting person is reporting the acquisition of shares of issuer's Employee Stock Purchase Plan ("ESPP") for the ESPP purchase period of May 1, 2013 to Octobr 31, 2013.
- (3) On November 13, 2013 the reporting person gifted 92 shares of Common Stock to his family trust. The reporting person is the trustee.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.