**BAFFI ROBERT** Form 4 April 12, 2013

FORM 4

#### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number: January 31,

Expires:

5. Relationship of Reporting Person(s) to

Issuer

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

2005 Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

**BAFFI ROBERT** 

1. Name and Address of Reporting Person \*

DAFFI KUDEK I			BIOMARIN PHARMACEUTICAL INC [BMRN]					(Check all applicable)			
(Last)	(First) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year)				Director 10% OwnerX_ Officer (give title Other (specify			
C/O BIOMARIN			04/10/2013					below) below) EVP, Technical Operations			
	CEUTICAL INC.,	105							•		
DIGITAL D	DRIVE										
(Street) NOVATO, CA 94949			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
			Filed(Month/Day/Year)								
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution		3. Transaction Code (Instr. 8)	4. Securition(A) or Dis (Instr. 3, 4	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
C				Code V	Amount	(D)	Price	(Ilisti. 3 and 4)			
Common Stock	04/10/2013(1)	04/10/2	013	M	20,000	A	\$ 14.39	72,350	D		
Common Stock	04/10/2013(1)	04/10/2	013	S	20,000	D	\$ 64 (2)	52,350	D		
Common Stock								8,238	I	Shares held by Baffi Family Trust	

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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.

SEC 1474 (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	Exercise any ee of (Month/Day/Ye ivative		4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shar
Stock Option (right to buy) Common Stock	\$ 14.39	04/10/2013(1)	04/10/2013	M	20,000	11/12/2009(3)	05/11/2019	Common Stock	20,00

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BAFFI ROBERT C/O BIOMARIN PHARMACEUTICAL INC. 105 DIGITAL DRIVE NOVATO, CA 94949

**EVP**, Technical Operations

## **Signatures**

/s/ Laura Randall Woodhead,
Attorney-in-Fact
04/12/2013

\*\*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).
- (1) Transaction made pursuant to a Rule 10b5-1 plan executed on March 4, 2013.
- (2) All shares sold at the same price.
- (3) Options vest 6/48ths on November 12, 2009 and 1/48th on the 12th of each month thereafter.

Reporting Owners 2

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(4) Reflects the number of stock options that remain outstanding from this specific stock option grant following the reported transaction.  Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, <i>see</i> 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.