Wood Mark Form 4 August 24, 2011

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * Wood Mark			2. Issuer Name and Ticker or Trading Symbol BIOMARIN PHARMACEUTICAL INC [BMRN]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle)  C/O BIOMARIN PHARMACEUTICAL INC., 105 DIGITAL DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 08/22/2011					Director 10% Owner Officer (give title Other (specify below) VP, Human Resources			
NOVATO,		Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqui	ired, Disposed of,	or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed		3. 4. Securities Acquired (A Transactioror Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price				5. Amount of 6. 7. N Securities Ownership Ind Beneficially Form: Ber Owned Direct (D) Ow		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/22/2011(1)	08/22/20	11	M	83	A	\$ 17.86	20,717	D		
Common Stock	08/22/2011(1)	08/22/20	08/22/2011		937	A	\$ 14.39	21,654	D		
Common Stock	08/22/2011(1)	08/22/20	08/22/2011		1,020	D	\$ 27.0331 (2)	20,634	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

#### Edgar Filing: Wood Mark - Form 4

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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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	onof Derivative	6. Date Exercisals 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	Amount or Number of Shares
Stock Option (right to bu) Common Stock	\$ 17.86	08/22/2011 <u>(1)</u>	08/22/2011	M	83	06/17/2009(3)	12/16/2018	Common Stock	83
Stock Option (right to buy) Common Stock	\$ 14.39	08/22/2011 <u>(1)</u>	08/22/2011	M	937	11/12/2009(4)	05/11/2019	Common Stock	937

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

VP, Human Resources

Wood Mark

C/O BIOMARIN PHARMACEUTICAL INC.

105 DIGITAL DRIVE

**NOVATO, CA 94949** 

## **Signatures**

/s/ Laura Randall Woodhead,
Attorney-in-Fact

08/24/2011

\*\*Signature of Reporting Person Date

Reporting Owners 2

### **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 Trading plan executed on August 20, 2010.
  - The price in Column 4 is a weighted average price. The prices actually received ranged from \$26.79 to \$27.30. The reporting person will
- (2) provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.
- (3) Original option grant vests 6/48th on June 17, 2009 and 1/48th each on the 17th of each month thereafter.
- (4) Original option grant vests 6/48th on November 12, 2009 and 1/48th each on the 12th of each month thereafter.

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.