BONE CARE INTERNATIONAL INC

Form 4

December 22, 2004

OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading BERNS PAUL L Issuer

		INC [BCII]	(Check all applicable)		
(Last) 1600 ASPE	(Last) (First) (Middle) 500 ASPEN COMMONS		3. Date of Earliest Transaction (Month/Day/Year) 12/20/2004	X Director 10% OwnerX Officer (give title Other (specify below) President/CEO	
(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	
MIDDLETO	ON, WI 53562			Form filed by More than One Reporting Person	

BONE CARE INTERNATIONAL

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	Secur	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired (A) Transactiomr Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			Securities Ownership Ind Beneficially Form: Ber Owned Direct (D) Ow	7. Nature of Indirect Beneficial Ownership			
			Code V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
BCII Common Stock	12/20/2004		S	5,000	D	\$ 26.0119	315,555	D	

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

Symbol

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Check all applicable)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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)	orDerivative Securities		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	Amount or Number of Shares
1996 Stock Option Plan	\$ 3.4	12/20/2004		M		2,500	07/24/2003	07/24/2012	Common Stock	2,500
1996 Stock Option Plan	\$ 3.4	12/20/2004		M		7,500	07/24/2003	07/24/2012	Common Stock	7,500
1996 Stock Option	\$ 3.4	12/20/2004		M		2,500	07/24/2003	07/24/2012	Common Stock	2,500
1996 Stock Option Plan	\$ 3.4	12/21/2004		M		25,000	07/24/2003	07/24/2012	Common Stock	25,000
1996 Stock Option Plan	\$ 3.4	12/21/2004		M		10,000	07/24/2003	07/24/2012	Common Stock	10,000
1996 Stock Option Plan	\$ 3.4	12/21/2004		M		12,500	07/24/2003	07/24/2012	Common Stock	12,500

Reporting Owners

Reporting Owner Name / Address	Relationships							
r g	Director	10% Owner	Officer	Other				
BERNS PAUL L								
1600 ASPEN COMMONS	X		President/CEO					
MIDDLETON, WI 53562								

Reporting Owners 2

Signatures

/S/ Paul L. Berns 12/22/2004

**Signature of Date
Reporting Person

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.

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