FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Erck Stanley C</u>						2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [ BCRX ]								Relationship eck all appli X Directo	cable)	g Perso	on(s) to Issu 10% Ow	
(Last) (First) (Middle) 4505 EMPEROR BLVD. SUITE 200					05	3. Date of Earliest Transaction (Month/Day/Year) 05/31/2013  4. If Amendment, Date of Original Filed (Month/Day/Year)								below)	(give title		Other (s below)	
(Street)		NC 27703  (State) (Zip)			_   4.1	II AME	enament, i	Date (	oi Onginai Fi	leu i	(мони/да)	// rear)	Lin	X Form t	iled by One	Repo	orting Persor	1
(City)	(5		(Zip)	. Dori	ivetiv	, Co	ouritio.	. ^ .	auirod D	ior	20004 0	f or Bor	oficial	ly Owns				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				saction	Execution Date,			3. Transact	ion str.	4. Securities Acquired Disposed Of (D) (Instr. 5)		d (A) or	5. Amou Securiti Benefic	es Forn Ally (D) o Following (I) (II I ion(s)		: Direct r Indirect str. 4)	7. Nature of ndirect Beneficial Ownership (Instr. 4)	
									uired, Dis s, options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	Code (Instr				6. Date Exercisable a Expiration Date (Month/Day/Year)			d 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	tive ties cially I ing ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Automatic Stock Option Grant <sup>(1)</sup>	\$1.71	05/31/2013			A		15,000		06/30/2013 <sup>(2</sup>	) (	05/31/2023	Common Stock	15,000	\$0	15,00	0	D	

## **Explanation of Responses:**

- $1. \ Automatic non-employee \ director \ grant \ pursuant \ to \ the \ Bio Cryst \ Pharmaceuticals, Inc. \ Stock \ Incentive \ Plan.$
- 2. Vests 1/12 per month over 12 months beginning June 30, 2013.

<u>/s/ Alane Barnes, by power of attorney</u>

06/03/2013

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.