FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL								
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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>Jensen Peder</u>					BI	2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]											10% Ov	vner
(Last) (First) (Middle) 4505 EMPEROR BLVD. SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 05/31/2013									below)	(give title	Filing	Other (s below)		
(Street) DURHAM NC		27703	4.11	4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S		(Zip)		<u> </u>		•••			_			<u> </u>					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				action	2A. Deemed Execution Date,			3. Transacti Code (Ins	ion str.	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		d (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Table II - I)						uired, Dis s, options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s S Ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				c	code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Automatic Stock Option Grant ⁽¹⁾	\$1.71	05/31/2013			A		15,000		06/30/2013 ⁽²⁾		5/31/2023	Common Stock	15,000	\$0	15,000	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.