FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL OMB Number: Estimated average burden

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

Name and Address of Reporting Person* Jensen Peder				BI	2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]															
(Last) (First) (Middle) 4505 EMPEROR BLVD. SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 11/18/2011										Office below	er (give title v)		other (elow)	specify
(Street) DURHAM NC 27703 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ur) I	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4			l and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Price	•	Transaction(s) (Instr. 3 and 4)				(
Common Stock 1:					11/18/2011						10,00	0	A	\$2.75		20,000		D		
	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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)			ative rities ired osed . 3, 4	Expiratio (Month/D	Date Exercisable and Expiration Date Month/Day/Year) Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ Michael Richardson, by power of attorney

11/18/2011

** Signature of Reporting Person

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.