FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burde	en				
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>LEE KENNETH B JR</u>				<u>E</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC BCRX						[ (Che	ck all applic Directo	able)	g Person(s) to Isso 10% Ov Other (s below)		wner
(Last) (First) (Middle) 4505 EMPEROR BLVD., SUITE 200					3. Date of Earliest Transaction (Month/Day/Year) 06/20/2018						Officer below)	(give title	pecify			
(Street) DURHAM NC 27703			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)									Person				
		Tal	ole I - Non-I	Derivati	ve Se	curitie	s Ac	quired, Di	sposed o	f, or Ber	neficially	y Owned				
Da			t. Transactio Date Month/Day/	Execution Date,		Code (Inst	ransaction Disposed Of (D) (Instr. 3, 4)			5. Amour Securitie Beneficia Owned F Reported	es Form ally (D) of Following (I) (II		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			msu. 4 <i>j</i>
			Table II - De					uired, Disp 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 Date if any (Month/Day/Ye	Code	action (Instr.	on of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount 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(s) (Instr. 4)		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>	\$6.09	06/20/2018		A		30,000		07/20/2018 <sup>(2)</sup>	06/20/2028	Common Stock	30,000	\$0	30,000	0	D	

## **Explanation of Responses:**

- 1. Automatic non-employee director grant pursuant to the BioCryst Pharmaceuticals, Inc. Stock Incentive Plan.
- 2. Vests 1/12th per month over twelve months beginning July 20, 2018.

/s/ Alane P. Barnes, by power of attorney 06/22/2018

\*\* 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.