Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
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

1. Name and Address of Reporting Person*  INGRAM ROBERT ALEXANDER					2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC BCRX								(Ched	5. Relationship of Reporting Person(s) Check all applicable) X Director 10				wner	
(Last) (First) (Middle) 280 S. MANGUM STREET SUITE 350					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2023									Office below	er (give title /)		Other ( below)	specify	
(Street) DURHAM NC 27701 (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Nor	n-Deriva	tive S	Secu	ırities	s Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)						Executio y/Year) if any		ution Date,				es Acquired (A Of (D) (Instr. 3,			5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) or Pi		rice	Transa	ction(s) 3 and 4)			(1130.4)	
Common	2023			A		2,259	A S		\$8.85	85 100,198			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	Exercise (Month/Day/Year) if any (Month/Day/Year) ivative			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	or osed ) r. 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)	(D)	Date Exercisa	able	Expiration Date	Title	Num of Share	.					

## **Explanation of Responses:**

 $1. \ Shares of \ Common \ Stock \ is sued to the \ reporting \ person \ in \ lieu \ of \ quarterly \ cash \ Board \ Member \ retainer \ of \ \$20,000.$ 

/s/ Alane P. Barnes, by power of attorney

03/02/2023

\*\* 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.