FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
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1	hours per response:	0.5								

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1. Name and Address of Reporting Person* SANDERS CHARLES A					2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					BCRX]									X Dire	ctor	10% (Owner	
(Last) (First) (Middle)												_	Office belo	cer (give title w)	Other below	(specify		
4505 EMPEROR BLVD. SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 11/30/2015														
(Chroat)				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) DURHA	M NO	C 2	27703												X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St	ate) (Zip)															
		Tabl	e I - Nor	n-Deriv	ative S	ecurit	ies Ac	quired,	Dis	posed o	f, or	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execut if any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			nd Secui Benet	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	1)	A) or D)	Price	Trans	action(s) . 3 and 4)		(111501.4)	
Common Stock ⁽¹⁾ 11/30/)/2015		A		824		A \$10.6		.61	8,575	D		
		Та								sed of, onvertib				y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	sion Date Exe cise (Month/Day/Year) if ai ive (Mo	if any	ecution Date,		action of		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amor Secu Unde Deriv			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	1	I	I	- 1	- 1	- 1	1 1		- 1		I	Am	ount		I	1	1	

Date Exercisable

Expiration Date

Explanation of Responses:

1. Shares of Common Stock issued to the reporting person in lieu of quarterly cash Board Member retainer of \$8,750.

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

Number

of Shares

Title

12/03/2015

** 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).

Code

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.

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