FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* Gayer Charles K						2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC BCRX									neck all ap Dire	tionship of Reportir all applicable) Director Officer (give title		rson(s) to Is 10% Ov Other (s	vner
(Last) (First) (Middle) 4505 EMPEROR BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024											below) Chief Comm		below) al Officer	
SUITE 200					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				
(Street) DURHAM NC 27703															For	m filed by On m filed by Mo son		•	- 1
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication														
											saction was mons of Rule 10					truction or writ	ten pla	ın that is inter	nded to
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Exec if an	Deemed oution Date, y oth/Day/Year)				es Acquired (A) Of (D) (Instr. 3, 4			d Secu Bene Own	nount of rities ficially ed Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price		action(s) 3 and 4)			(Instr. 4)
Common Stock 05/13/2					2024				P		30,000	1	A	\$5.4	7 3	07,533		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	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc ion Da /Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f g	8. Price o Derivative Security (Instr. 5)		illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount mber ares					

Explanation of Responses:

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

05/15/2024

** 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.