FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

-	OMB APPROVAL	

OMB Number:

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

1. Name and Address of Reporting Person*

2190 PARKWAY LAKE DR

(First)

(Middle)

35244

Erck Stanley C

BIRMINGHAM AL

(Last)

(Street)

(Instr. 3)

Qualified

Stock Option

	I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940	ERSH	IP	OMB Number: Estimated aver hours per respo	o .	0.5
ddle)	Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX] Jate of Earliest Transaction (Month/Day/Year) 12/22/2008		all applicable Director	e) 	10% Owner Other (specif below)	ÿ
244	BIOCRYST PHARMACEUTICALS INC [BCRX] (Check all applicable) X Director 10% Own Officer (give title below) Other (sp below)					

Form filed by More than One Reporting

(City)	(S	ate)	(Zip)									Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)		Date	n/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Yea				Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						Code	v	Amount	(A) or (D)						(Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code (Instr.	of	6. Date Exercisable Expiration Date (Month/Day/Year)					8. Price of Derivative Security	9. Numbe derivative Securities	s	10. Ownership Form:	11. Nature of Indirect Beneficial		

Explanation of Responses:

\$1,49

Price of Derivative

Security

1. Shares vest on a pro rata monthly basis over a period of 5 months. Options will be fully vested in May 2009 at the Annual Shareholder's Meeting.

Code

Α

/s/ Michael Richardson, by 12/23/2008 power of attorney

(Instr. 5)

\$1.49

Beneficially Owned

Following

Reported

Transaction(s) (Instr. 4)

8.333

Direct (D) or Indirect

(I) (Instr. 4)

D

Ownership (Instr. 4)

** Signature of Reporting Person Date

Title

Common

Expiration

12/22/2018

Date

Underlying Derivative Security

Amount Number

of Shares

8,333

(Instr. 3 and 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

if any (Month/Day/Year)

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

12/22/2008

** 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.

Securities Acquired (A) or Disposed

of (D) (Instr. 3, 4

Date

Exercisable

01/22/2009⁽¹⁾

(D)

and 5)

(A)

8,333