FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
ı	Estimated average burden									

0.5

hours per response:

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

Name and Address of Reporting Person*     Stonehouse Jon P					<u>B</u> ]	2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) 4505 EM SUITE 2	IPEROR BI	,	(Middle)	3. [	BCRX ]  3. Date of Earliest Transaction (Month/Day/Year) 07/15/2015								X Officer below)	(give title Presiden	t & CI	Other (s below)	pecify		
(Street) DURHA (City)			27703 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deri	vativ	e Se	curit	ies Ac	quired,	Dis	posed o	f, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		ties Acquir I Of (D) (Ins	ed (A) or str. 3, 4 and	Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	r Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)	
Common Stock 07/15/3						2015		М		33,86	8 A \$11		1 684	684,737					
Common Stock 07/15/2					5/201	/2015		F		25,520	6 D	\$15.6	659,211		Ι	)			
		-	Table II -								osed of, onvertil			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code ( 8)		of		6. Date Exercisa 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 derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y D	0. Ownership orm: Oirect (D) or Indirect (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares						
Emp. Stock Option (Right to	\$11.81	07/15/2015			M			33,868	01/05/20	08 (	01/05/2017	Common Stock	33,868	\$0	416,132	2	D		

Explanation of Responses:

/s/ Alane P. Barnes, by power

07/17/2015

<u>of attorney</u>

\*\* 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.