FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL
=	

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* SPENCER WILLIAM M III					2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC						[(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
SPENCER WILLIAM M III				1	BCRX]							X Directo		10% C	·	
(Loot)		Circt)	(Middle)								_	Officer below)	(give title	Other below)	(specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/11/2005							20.01.)			
2190 PARKWAY LAKE DR					05/11/2											
(Ctroot)				.	4. If Am	endment,	Date (of Original File	ed (Month/Da	ıy/Year)	6. Ir		loint/Group Fi	iling (Check A	plicable	
(Street) BIRMING	СНАМ /	ΛΤ	35244								- 1	,	iled by One R	Reporting Pers	on	
DIKMIN	GIIAWI I	XL.	33244										•	than One Rep		
(City)	(State)	(Zip)									Persor		anan One Rep	or unig	
(City)		State)	(Zip)													
		Tal	ble I - Non	-Derivat	ive Se	ecuritie	s Ac	quired, Di	sposed o	f, or Bei	neficial	y Owned				
Date				2. Transact Date (Month/Day	Execution Da		Date	Pate, Transaction D Code (Instr. 5		ount (A) or (D) (D) (A) or (D)		4 and Securities Beneficially Owned Follow		. Ownership form: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code V	Amount	Reported Transact (Instr. 3 a			ion(s)		(Instr. 4)		
			Table II - D	erivativ	re Sec	curities	Aca	uired. Dis	posed of.	or Bene	eficially	Owned				
								s, options,								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Date Execution D	Date, Transaction Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option	\$4.3	05/11/2005	05/11/200	5 A		10,000		06/11/2005 ⁽¹⁾	05/11/2015	Common Stock	10,000	\$4.3	83,750	D		

Explanation of Responses:

1. Vest at 1/12 of total grant from grant date.

Remarks:

<u>Michael Richardson by Power of Attorney</u>

05/13/2005

** 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.