FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		

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

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

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

Ownership (Instr. 4)

or Indirect (I) (Instr. 4)

D

	, ,				or Sect	tion 30(h) of the Ín	vestme	nt Con	npany Act o	f 1940						
1. Name and Address of Reporting Person* BENNETT J CLAUDE (Last) (First) (Middle) 2190 PARKWAY LAKE DR				2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC BCRX 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2004						0#:	uer wner specify					
(Street) BIRMING (City)		(State)	35244 (Zip)	n-Deriv	4. If Amendment, Date of Original Filed (Month/Day/Year) ative Securities Acquired, Disposed of, or Benefic					Line)	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transc Date (Month/L			action	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Trans	action (Instr.	4. Securiti	es Acquired Of (D) (Instr.	(A) or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						curities Acqu ls, warrants,				or Benef		<u> </u>	nu 4)			
Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, Traccurity or Exercise (Month/Day/Year) if any Co		ansaction ode (Instr.	Derivative	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) T. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			es I Security	8. Price of Derivative Security (Instr. 5)	Derivative derivative Security Securites		10. Ownership Form: Direct (D) or Indirect	Beneficial Ownershi			

Date

Exercisable

05/12/2005

(D)

Expiration

05/12/2014

Date

Title

Commo

Stock

Explanation of Responses:

\$8.83

Security

 $1.\ Four\ year\ vesting\ schedulde.\ 25\%\ after\ 12\ months\ from\ original\ grant\ date.\ 1/48\ each\ following\ month.$

Remarks:

Employee Stock

Option

/s/Michael Richardson, by Power of Attorney

Amount

or Number

Shares

40,053

\$8.83

of

05/13/2004

403,305

Owned Following

Reported Transaction(s)

(Instr. 4)

** 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).

05/12/2004

** 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.

Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

(A)

40,053(1)