FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
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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

1. Name and Address of Reporting Person* Hutson Nancy J (Last) (First) (Middle) 64 MONTAUK AVENUE (Street) STONINGTON CT 06378 (City) (State) (Zip)					3. E 05/	2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC BCRX 3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021 4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir	Relationship of Reporting Perscheck all applicable) X Director Officer (give title below) Individual or Joint/Group Filing ne) X Form filed by One Reporting Form filed by More than Person			10% Owner Other (specify below) g (Check Applicable orting Person	
(0.5)			(Zip)	-Deriv	zativ.	9 50	curities	. Δ C	quired D)ier	nosed o	f or Rei	neficiall	v Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action Day/Ye	Execution Date,		3. Transact Code (In 8) Code	str.	4. Securior Disposed 5) Amount Disposed of,	ties Acquire I Of (D) (Ins (A) or (D)	Price	5. Amou Securitie Beneficia Owned F Reporter Transact (Instr. 3 a	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		: Direct 0 Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	d 4 Date, 1 (Year) 8	L. Transac Code (I	ction	5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es ed ed nstr.	options 6. Date Exer Expiration I (Month/Day) Date Exercisable	rcisa Date //Yea	able and	7. Title and of Securiti Underlying Derivative (Instr. 3 ar	d Amount ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Automatic Stock Option Grant ⁽¹⁾	\$13.28	05/25/2021			A		40,000		05/25/2022	0	5/25/2031	Common Stock	40,000	\$0	40,000		D	

Explanation of Responses:

1. Automatic non-employee director grant pursuant to the BioCryst Pharmaceuticals, Inc. Stock Incentive Plan.

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

05/27/2021

** 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.

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