SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287

Section obligati	this box if no lo 16. Form 4 or ions may contin tion 1(b).		STATEN	Filed pur	suant	to Section	 1 16(a	a) of the Secu Investment C	rities Exchan	ge Act of 1		SHIP		mber: d average burde r response:	3235-0287 n 0.5
1. Name and Address of Reporting Person [*] ABERCROMBIE GEORGE B				B	2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]							eck all applic X Directo	able) r	Person(s) to Iss	vner
(Last) (First) (Middle) PO BOX 16069					3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021							Officer below)	(give title	Other (s below)	specify
(Street) CHAPEL HILL NC 27516			27516	4.	If Ame	ndment,	Date (of Original Fil	ed (Month/Da	ay/Year)	Line	e) <mark>X</mark> Form fi	led by One R	iling (Check Ap Reporting Perso Ran One Repo	n
(City)	(S		(Zip)									Person			
													7. Nature		
Date (Month/D					ay/Year) (Month/Day/			Code (Instr. 5)		(A) or (D) (Ins	, 	Beneficia Owned F Reported Transact	Securities Form Beneficially (D) of Owned Following (I) (II Reported Transaction(s) (Instr. 3 and 4)		of Indirect Beneficial Dwnership 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 (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	4. Transa Code) 8)				6. Date Exerc Expiration D (Month/Day/	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Automatic Stock Option Grant ⁽¹⁾	\$13.28	05/25/2021		A		40,000		05/25/2022	05/25/2031	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.

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.