

**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

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).

1. Name and Address of Reporting Person* <u>Stonehouse Jon P</u>  (Last) (First) (Middle) 4505 EMPEROR BLVD. SUITE 200  (Street) DURHAM NC 27703  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BIOCRYS T PHARMACEUTICALS INC [ BCRX ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below)  President & CEO
	3. Date of Earliest Transaction (Month/Day/Year) 12/14/2021	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	09/01/2021		G <sup>(1)</sup>	V	5,000	D	\$0	783,602	D	
Common Stock	09/01/2021		G <sup>(2)</sup>	V	5,000	D	\$0	778,602	D	
Common Stock	09/01/2021		G <sup>(1)</sup>	V	5,000	A	\$0	5,000	I	By wife as co-trustee of the Samuel Stonehouse Irrevocable Trust
Common Stock	09/01/2021		G <sup>(2)</sup>	V	5,000	A	\$0	5,000	I	By wife as co-trustee of the Caroline Stonehouse Irrevocable Trust
Common Stock	12/14/2021		A		123,000 <sup>(3)</sup>	A	\$0	901,602	D	

**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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and 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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. 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					
Emp. Stock Option (Right to Buy)	\$11.43	12/14/2021		A		574,500 <sup>(4)</sup>		12/14/2022	12/14/2031	Common Stock	\$0	574,500	D	

**Explanation of Responses:**

- Reflects a gift of shares by the reporting person to the Samuel Stonehouse Irrevocable Trust.
- Reflects a gift of shares by the reporting person to the Caroline Stonehouse Irrevocable Trust.
- Annual award of Restricted Stock Units which will vest 25% on each of the first, second, third and fourth anniversaries of the date of grant.
- Annual Employee Option Grant becomes exercisable at the rate of 25% on each of the first, second, third and fourth anniversaries of the date of grant.

/s/ Alane P. Barnes, by power of attorney 12/16/2021

\*\* 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.