## Edgar Filing: BIOCRYST PHARMACEUTICALS INC - Form 4

BIOCRYST Form 4 June 01, 200	C PHARMACEU 09	ΓICALS II	NC							
FORM	ЛΔ								PPROVAL	
	STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549				N OMB Number:	3235-0287			
Check ti if no lor subject Section Form 4	nger <b>STATEN</b> 16.								Expires: January 31, 2005 Estimated average burden hours per response 0.5	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							. 0.0			
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> HIGGINS JOHN L			2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS			<ul><li>5. Relationship of Reporting Person(s) to Issuer</li><li>LS (Check all applicable)</li></ul>				
			INC [BCRX]							
(Last) (First) (Middle) 2190 PARKWAY LAKE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 04/30/2009			_X_ Director 10% Owner Officer (give title Other (specify below) below)				
				Filed(Month/Day/Year) App _X_				. Individual or Joint/Group Filing(Check pplicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting		
BIRMING	HAM, AL 35244-	-					Person	More than One R	eporung	
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V		(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Damindam Da	nort on a constation	a for each al	nes of coo				or indirectly			
Keminder: Ke	port on a separate line	e for each cla	ass of sec	unnes bene	Perso inforn requir	ns who res nation cont red to respo	prindirectly. spond to the colle ained in this form ond unless the for ntly valid OMB co	i are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Ar
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Se
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

number.

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Disposed of D) nstr. 3, 4,		
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Non Qualified								
Non-Qualified Stock Option	\$ 3.96	04/30/2009		А	15,000	05/30/2009	04/30/2019(2)	Common Stock
Stock Option $(1)$	\$ 8.83					06/12/2004	05/12/2014(2)	Common Stock
Stock Option $(1)$	\$ 4.3					06/11/2005	05/11/2015(2)	Common Stock
Stock Option $(1)$	\$ 12.26					06/17/2006	05/17/2016(2)	Common Stock
Stock Option $(1)$	\$ 7.98					06/16/2007	05/16/2017 <u>(2)</u>	Common Stock
Stock Option $(1)$	\$ 3.12					06/21/2008	05/21/2018(2)	Common Stock

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
FB	Director	10% Owner	Officer	Other		
HIGGINS JOHN L 2190 PARKWAY LAKE DRIVE BIRMINGHAM, AL 35244-	Х					
Signatures						
/s/ Michael Richardson, by power attorney	of	06/01/2009				
**Signature of Reporting Person		Da	ite			

## **Explanation of Responses:**

- \* 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).
- (1) Automatic non-employee director grant
- (2) Vest @ 1/12 per month over 12 months

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.