Edgar Filing: BIOCRYST PHARMACEUTICALS INC - Form 4

BIOCRYST I Form 4 March 03, 20	PHARMACEUT	ICALS INC	С								
FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	s box er STATEM 5. Filed purs ¹⁵ nue. ction	ENT OF (uant to Sec) of the Pu	Was CHAN CHAN Ction 16 Iblic Uti	hington, GES IN I SECUR	D.C. 209 BENEFI ITIES e Securiti ling Com	549 CIA ies Ex ipany	L OW schang Act of	COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	OMB Number: Expires: Estimated a burden hou response	rs per	
			2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month				Date of Earliest Transaction onth/Day/Year) /27/2015				X_ Director 10% Owner Officer (give title Other (specify below) below)			
FORT WOR	(Street) TH, TX 76102	Filed(Month/Day/Year) Ap _X H TX 76102					Applicable Line) _X_ Form filed by (or Joint/Group Filing(Check e) I by One Reporting Person by More than One Reporting			
(City)	(State) (Zip)	Table	e I - Non-De	erivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V		4 and (A) or	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock (1)	02/27/2015			A	857	A	\$ 10.2	102,314	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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)	4. Transactic Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting of the real of the	Director	10% Owner	Officer Other				
Cohen Fred E 301 COMMERCE STREET SUITE 3300 FORT WORTH, TX 76102	Х						
Signatures							
/s/ Alane P. Barnes, by power of attorney	of	03/03/2015					
<u>**</u> Signature of Reporting Person		Da	nte				

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) Shares of Common Stock issued to the reporting person in lieu of quarterly cash Board Member retainer of \$8,750.

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.