BIOCRYST PHARMACEUTICALS INC

Form 4 June 01, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287 January 31,

0.5

Check this box if no longer

subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per

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OMB APPROVAL

Form 4 or 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * FEATHERINGILL WILLIAM W

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

BIOCRYST PHARMACEUTICALS INC [BCRX]

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

X Director Officer (give title

10% Owner Other (specify

2190 PARKWAY LAKE DRIVE

(Street)

04/30/2009

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

(Instr. 4)

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

below)

BIRMINGHAM, AL 35244-

(City) (State) (Zip)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A) or

(Instr. 3, 4 and 5)

Following Reported Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Ar TransactionDerivative Derivative **Expiration Date** Underlying Se Conversion (Month/Day/Year) Execution Date, if (Month/Day/Year) (Instr. 3 and 4) Security or Exercise Code Securities any

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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)			
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option	\$ 3.96	04/30/2009		A	15,000	05/30/2009	04/30/2019(2)	Common Stock
Common Stock Warrants (Right to Buy)	\$ 10.25					(3)	08/06/2012	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(2)	Common Stock
Stock Option (1)	\$ 3.12					06/21/2008	05/21/2018(2)	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
FEATHERINGILL WILLIAM W 2190 PARKWAY LAKE DRIVE BIRMINGHAM, AL 35244-	X	X				

Signatures

/s/ Michael Richardson, by power of attorney 06/01/2009

**Signature of Reporting Person Date

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
- (3) Warrants (right to buy) are exercisable once issued.

Reporting Owners 2

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(4) Mr. Featheringill is the Chairman of the Board of EHS Holdings, Inc. He owns approximately 91% of EHS Holdings, Inc. 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.