Edgar Filing: Hutson Nancy J - Form 4

Hutson Nancy	y J										
Form 4											
September 05	5, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this									Expires:	January 31,	
if no longe subject to	STATI	EMENT O	F CHAN	GES IN H	BENEFI	CIA	LOW	NERSHIP OF	Estimated a	2005 average	
Section 16	5.	SECURITIES							burden hours per		
Form 4 or Form 5			~		~	_	_		response	0.5	
obligation	_						•	ge Act of 1934,			
may conti				•	•	- ·		of 1935 or Sectio	n		
See Instru- 1(b).	ction	30(h)	of the Inv	estment	Compan	y Act	of 19	40			
(Print or Type R	esponses)										
1. Name and Address of Reporting Person * Hutson Nancy J2. Issue Symbol				. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
E			BIOCRY	BIOCRYST PHARMACEUTICALS INC [BCRX]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			_X_ Director	10%	6 Owner	
				Month/Day/Year) 19/01/2017				Officer (give titleOther (specify below)			
04 MONTA											
				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
STONINGT	ON, CT 06378	8	Filed(Mont	h/Day/Year)				•	One Reporting Performed Performent Performance Perform		
								Person			
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	any		emed3.4. Securitieson Date, ifTransactionAcquired (A) or CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(11041-1)	(11047-1)	
Common Stock (1)	09/01/2017			А	1,960	A	\$ 5.1	34,167	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)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amoun Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Hutson Nancy J 64 MONTAUK AVENUE STONINGTON, CT 06378	Х						
Signatures							
/s/ Alane P. Barnes, by power of attorney	of	09/05/2017					
**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) Shares of Common Stock issued to the reporting person in lieu of quarterly cash Board Member retainer of \$10,000.

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.