Edgar Filing: STAAB THOMAS R II - Form 4

STAAB T Form 4	HOMAS R II										
December	22, 2017										
FOR	M 4 united) STATES	SECU	RITIFS /	ND FY	CHANGE	COMMISSION		PPROVAL		
	UNITE	JSIAILS	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287		
Check if no lo subject Section Form 4 Form 5	t to SIAIE n 16. 4 or		F CHAN	WNERSHIP OF	Expires: Estimated burden hou response	urs per					
obligat may co	Filen p	ursuant to S 7(a) of the I 30(h)	n								
(Print or Typ	e Responses)										
1. Name and Address of Reporting Person <u>*</u> STAAB THOMAS R II			2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICA				5. Relationship of Reporting Person(s) to Issuer				
			INC [B		ARMAC	EUTICAL	ALS (Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify				
4505 EMI 200	PEROR BLVD., S	SUITE	12/20/2	-			below) below) Senior Vice President and CFO				
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
DURHAN	A, NC 27703						Form filed by N Person	Nore than One R	Reporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed of	f, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	SecuritiesFBeneficially(Owned(6. Ownership Form: Direct D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: R	eport on a separate lin	ne for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.				
					inforr requi	nation cont red to respo ays a curre	spond to the collec ained in this form ond unless the form htly valid OMB con	are not m	SEC 1474 (9-02)		
	Ta					posed of, or convertible s	Beneficially Owned securities)				
1. Title of Derivative		nsaction Date h/Day/Year)			4. Transact	5. Number iorDerivative			7. Title and Amount of Underlying Securities		

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Security (Instr. 3)	or Exercise Price of Derivative Security			ny Month/Day/Year	Code) (Instr. 8)	Securities Acquired (A Disposed of (Instr. 3, 4, 4 5)	f (D)	(Month/Day/Y	'ear)	(Instr. 3 and	4)
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount o Number o Shares
Emp. Stock Option (Right to Buy)	\$ 5.04	12/20/20	017		А	100,000 (1)		12/20/2018	12/20/2027	Common Stock	100,000
Reporting Owners											
Reporting Owner Name / Address STAAB THOMAS R II				Relationships							
			Director	10% Owner	Officer		Other				

Senior Vice President and CFO

4505 EMPEROR BLVD. SUITE 200 DURHAM, NC 27703

Signatures

/s/ Alane P. Barnes, by power of attorney

**Signature of Reporting Person

12/22/2017

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) 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.

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.