## Edgar Filing: Sheridan William P - Form 4

Sheridan William Form 4	Р										
December 22, 201											
FORM 4	UNITED	STATES	SECUI	RITIES A	AND EX	CHANGE			PPROVAL		
	Washington, D.C. 20549							Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								January 31, 2005 average Jrs per . 0.5		
obligations may continue. <i>See</i> Instruction 1(b).	Section 17	(a) of the l	Public U	tility Hol	ding Cor		Act of 1935 or Section				
(Print or Type Respon	nses)										
1. Name and Address of Reporting Person <u>*</u> Sheridan William P			2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS			<ul><li>5. Relationship of Reporting Person(s) to Issuer</li><li>S (Check all applicable)</li></ul>					
			INC [B	-							
(Last) (First) (Middle) 4505 EMPEROR BLVD., SUITE			3. Date of Earliest Transaction (Month/Day/Year) 12/20/2017			Director 10% Owner   X Officer (give title Other (specify below)					
200		OIIL	12/20/2	.017			Se	enior VP - CMO			
() DURHAM, NC 2	Street) 27703			endment, D nth/Day/Yea	-	ıl	6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		erson		
(City) (a	State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	insaction Date th/Day/Year)	Execution any	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Reminder: Report on	a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.				
					inforn requi	nation cont red to respo ays a currer	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					posed of, or convertible s	Beneficially Owner securities)	d			
1. Title of 2.	3. Trans	saction Date	-		4.	5. Number		cisable and	7. Title and Amount of		

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative

Underlying Securities

Expiration Date

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	Securities Acquired Disposed (Instr. 3, 4 5)	of (D)	(Month/Day/Year)		(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	12/20/2017		A	100,000 (1)	I	12/20/2018	12/20/2027	Common Stock	100,000
Repor	rting Ov	vners								

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Sheridan William P 4505 EMPEROR BLVD. SUITE 200 DURHAM, NC 27703			Senior VP -	СМО				
Signatures								
/s/ Alane P. Barnes, by power of attorney	of	12/22	2/2017					

\*\*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) 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.