## Edgar Filing: BIOCRYST PHARMACEUTICALS INC - Form 4

BIOCRYST PI	HARMACEUTI	CALS II	NC										
Form 4	V												
August 15, 200											PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	-	3235-0287				
Check this b if no longer subject to Section 16. Form 4 or	STATEM	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: Estimated a burden hou response	irs per		
Form 5 obligations may continue. See Instruction 1(b). 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													
(Print or Type Res	sponses)												
ALEXANDER W JAMES Symbol BIOCH			Symbol	CRYST PHARMACEUTICALS					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date (Month				Date of Earliest Transaction onth/Day/Year) /14/2006					Director 10% Owner X Officer (give title Other (specify below) below) SR. VP, Chief Medical Officer				
Filed(Mont				endment, Date Original nth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
BIRMINGHA	M, AL 35244-								Person		epotting		
(City)	(State) (Z	Zip)	Table	I - Non-E	Derivat	tive S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)		n Date, if	a Date, if TransactionAcquired (A) or Code Disposed of (D) Pay/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amo	ount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	08/14/2006			Р	1,28	85	А	\$9	1,285	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. Transactio Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Secur	int of rlying	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							
FB	Director	10% Owner	Officer	Other				
ALEXANDER W JAMES 2190 PARKWAY LAKE DRIVE BIRMINGHAM, AL 35244-			SR. VP, Chief Medical Officer					
Signatures								
Michael Richardson by Power of Attorney	08/1	5/2006						

<u>\*\*</u>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).

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.