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BIOCRYST PHARMACEUTICALS INC

Form 4 March 05, 2009

FORM 4

OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287

Number:

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Check this box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue.

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

(Print or Type Responses)

1(b).

See Instruction

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

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

below)

BIOCRYST PHARMACEUTICALS

(Check all applicable)

INC [BCRX]

(Last) (First) (Middle)

(Month/Day/Year)

_X__ Director 10% Owner Other (specify Officer (give title

2190 PARKWAY LAKE DRIVE

(Street)

(State)

(Zip)

11/01/2000

4. If Amendment, Date Original

3. Date of Earliest Transaction

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Applicable Line)

BIRMINGHAM, AL 35244-

(City)

(City)	(State) (Z	Zip) Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or				5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)		Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
			Code V	Amount			Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	11/01/2000		P	6,000 (1)	A	\$ 9	1,803,572	D	
Common Stock	11/02/2000		P	5,000 (1)	A	\$9	1,808,572	D	

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

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

Signatures

/s/ Michael Richardson, by power of 03/05/2009 attorney

> **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).

Notwithstanding a long history of compliance, during a stock reconciliation effort between the Company and Mr. Featheringill the parties discovered that 11,000 shares of BioCryst stock purchased by Mr. Featheringill should have been recorded on a Form 4 in year 2000.

These shares were part of a much larger series of transactions in which all forms were properly filed. Soon after discovery of the inadvertent omission, Form 4 filing has been completed for the transaction. .

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.

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