### Edgar Filing: Sheridan William P - Form 4

| Sheridan Will<br>Form 4   |   |  |           |                                      |                                 |                              |                     |  |   |   |  |
|---|---|--|-----------|--------------------------------------|---------------------------------|------------------------------|---------------------|--|---|---|--|
| March 06, 2013<br>FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION   |   |  |           |                                      |                                 |                              |                     | OMB APPROVAL   |   |   |  |
|   | - UNITED S                              | IAIES SI   |           | hington, 1                           |                                 |                              | NGE (               | COMMISSION   | OMB<br>Number:  | 3235-0287   |  |
| Check this<br>if no longe<br>subject to<br>Section 16<br>Form 4 or  | sr STATEM                               |  |           |                                      |                                 |                              |                     |  | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |   |  |
| Form 5<br>obligations<br>may contin<br><i>See</i> Instruc<br>1(b).  | Section 17(a)                           | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |           |                                      |                                 |                              |                     |  |   |   |  |
| (Print or Type Re   | esponses)                               |  |           |                                      |                                 |                              |                     |  |   |   |  |
| Sheridan William P Symbol   |   |  | ymbol     | er Name <b>and</b> Ticker or Trading |                                 |                              |                     | 5. Relationship of Reporting Person(s) to<br>Issuer  |   |   |  |
|   |   |  | NC [BC    | RX]                                  |                                 |                              |                     | (Check all applicable)   |   |   |  |
| (Last)         (First)         (Middle)         3. Date of<br>(Month/D)           4505 EMPEROR BLVD., SUITE         03/01/20           200         03/01/20 |   |  | /Ionth/Da |                                      |                                 |                              |                     | Director 10% Owner<br>X_ Officer (give title Other (specify<br>below)<br>SR VP - CMO                               |   |   |  |
|   | (Street)                                | Street) 4. If Amend<br>Filed(Month   |           |                                      | e Original                      |                              |                     | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person            |   |   |  |
| DURHAM, N   | NC 27703                                |  |           |                                      |                                 |                              |                     |  | Aore than One Re  |   |  |
| (City)  | (State) (Z                              | Zip)   | Table     | I - Non-De                           | erivative S                     | Securi                       | ties Acq            | uired, Disposed of   | f, or Beneficial  | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution D<br>any<br>(Month/Day   | Date, if  |                                      | n(A) or Di<br>(D)<br>(Instr. 3, | sposed<br>4 and<br>(A)<br>or | d of<br>5)          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)                  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock   | 03/01/2013                              |  |           | Code V<br>F                          | Amount<br>1,789<br>(1)          | (D)<br>D                     | Price<br>\$<br>1.19 |  | 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)

#### **Reporting Owners** Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other Sheridan William P 4505 EMPEROR BLVD. SR VP - CMO SUITE 200 **DURHAM, NC 27703**

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4.

Code

(Instr. 8)

Execution Date, if

(Month/Day/Year)

5.

of

Derivative

Securities

Acquired

Disposed

(Instr. 3, 4, and 5)

Date

Exercisable

(A) or

of (D)

Code V (A) (D)

TransactionNumber

6. Date Exercisable and

Expiration

Date

**Expiration Date** 

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Amount or

Title Number

of

Shares

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

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Own

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Repo

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(Insti

| Signatures |
|------------|
|------------|

1. Title of

Derivative

Security

(Instr. 3)

2.

Conversion

or Exercise

Derivative

Price of

Security

| /s/ Alane Barnes, by power of attorney | 03/06/2013 |
|--|------------|
|  |            |

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Shares withheld by BioCryst Pharmaceuticals, Inc. upon the vesting of restricted stock to satisfy the reporting person's tax withholding (1)obligation.

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.