#### Edgar Filing: BIOCRYST PHARMACEUTICALS INC - Form 3

## BIOCRYST PHARMACEUTICALS INC Form 3 December 10, 2009 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

## OMB APPROVAL

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> SANDERS CHARLES A	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]				
(Last) (First) (Middle)	12/08/2009	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
2190 PARKWAY LAKE DR					•	
(Street)		(Check all applicable)		6. Individ	6. Individual or Joint/Group	
BIRMINGHAM, AL 35244		X Director Officer (give title below)	10% Owne Other (specify below)	Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - N	Non-Derivative	e Securities B	eneficiall	y Owned	
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	Owned O Fe D Out (I	Ownership Own orm: (Ins Direct (D) r Indirect	fature of Indi nership tr. 5)	irect Beneficial	
Reminder: Report on a separate line for e owned directly or indirectly.	ach class of securities benefic	ially SEC	2 1473 (7-02)			
Persons who res information cont required to resp currently valid O	spond to the collection of ained in this form are not ond unless the form displ MB control number. urities Beneficially Owned ( <i>e</i>	ays a	arrants, options.	convertible	e securities)	
	in thes beneficially 0 when (c.	.g., puis, cuis, we	arrants, options,	convertible	, securities)	
(Instr. 4) Exp	iration Date Securiti	and Amount of es Underlying ive Security	Conversion or Exercise Price of	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships				
	Director	10% Owner	Officer	Other	
SANDERS CHARLES A 2190 PARKWAY LAKE DR BIRMINGHAM, AL 35244	ÂX	Â	Â	Â	
Signatures					
/s/ Michael Richardson, by powe attorney	12/10/2009				
**Signature of Reporting Person	Date				

# **Explanation of Responses:**

### No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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.