

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* PLUMB RUSSELL H _____ (Last) (First) (Middle) 2500 NORTHWINDS PARKWAY, SUITE 100 _____ (Street) ALPHARETTA GA 30009 _____ (City) (State) (Zip)			2. Issuer Name and Ticker or Trading Symbol Biota Pharmaceuticals, Inc. [BOTA]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) CEO & President		
			3. Date of Earliest Transaction (Month/Day/Year) 12/05/2013					
			4. If Amendment, Date of Original Filed (Month/Day/Year)			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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 Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (Right to Buy)	\$4.13	12/05/2013		A		100,000		(1)	12/05/2023	Common Stock	100,000	\$0.00	100,000	D	
Market Stock Units	(2)	12/05/2013		A		25,000 ⁽²⁾		(3)	(3)	Common Stock	25,000	\$0.00	25,000	D	

Explanation of Responses:

- This option is a performance based option that will be 100% vested and exercisable upon hitting the primary endpoint for the Issuer's Phase 2 IGLOO trial on or before June 30, 2015, as determined by the Issuer's Compensation Committee in its sole discretion.
- Each Market Stock Unit (MSU) represents a right to receive up to 2.5 shares of the Issuer's common stock. The vesting amount will be determined based on the twenty day trailing average stock price of the Issuer's common stock measured as of the last day of the performance period beginning on December 5, 2013 and ending on January 1, 2017.
- Unless earlier forfeited under the terms of the MSU or accelerated upon a change of control transaction, each MSU vests and converts into no more than 2.5 shares of the Issuer's common stock on January 1, 2017.

Remarks:

/s/ Russell Plumb 12/09/2013
 ** Signature of Reporting Person Date

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

* 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.

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 Number.