Finn Andrew L Form 5 January 31, 2011

FORM 5

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if

OMB 3235-0362 Number:

no longer subject to Section 16. Form 4 or Form 5 obligations

January 31, Expires: 2005

1.0

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per

may continue. See Instruction response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported 30(h) of the Investment Company Act of 1940 Form 4

Symbol

Transactions Reported

Finn Andrew L

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to

> **BIODELIVERY SCIENCES** INTERNATIONAL INC [BDSI]

(Check all applicable)

(Last)

(Middle) (First)

3. Statement for Issuer's Fiscal Year Ended

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

(Month/Day/Year) 12/31/2010

below) Executive Vice President

C/O BIODELIVERY SCIENCES INTL, INC., Â 801 CORPORATE **CENTER DRIVE, SUITE 210**

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

RALEIGH, ÂNCÂ 27607

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

Issuer

below)

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

3. 1. Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (D) or (Instr. 3) Disposed of (D) Beneficially Beneficial Code (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A)

Fiscal Year

or (Instr. 3 and 4) Amount (D) Price

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.

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

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Derivative Security (Instr. 3)		Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Date (Month/Day/Year)		Underlying Securi (Instr. 3 and 4)	
						(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sl
	Option (to buy)	\$ 3.9	01/21/2010	Â	A4	22,751	Â	01/21/2011(1)	01/21/2020	Common Stock	22,

5. Number of

6. Date Exercisable and

7. Title and Amou

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 8	Director	10% Owner	Officer	Other		
Finn Andrew L C/O BIODELIVERY SCIENCES INTL, INC. 801 CORPORATE CENTER DRIVE, SUITE 210 RALFIGH Â NCÂ 27607	Â	Â	Executive Vice President	Â		

Signatures

1. Title of 2.

/s/ Andrew L.
Finn

**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

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- One third of the options granted herein will vest on each of the following dates, January 21, 2011; January 21, 2012 and January 21, 2013, subject to the condition that the reporting person is employed by the Issuer on each of the respective dates.
- (2) Not applicable. Such options were granted by the Issuer in connection as employee compensation.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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