FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*     MARIO ERNEST					CHI	2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [ CMRX ]										licable)	ng Pers	Person(s) to Issuer		
(Last)	(Fir	,	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 08/16/2013									Officer (give title below)			Other below)	(specify	
C/O CHIMERIX, INC. 2505 MERIDIAN PARKWAY, SUITE 340					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	M, NO	2	7713											X		filed by Mor	Reporting Person than One Reporti			
(City)	(Sta	ate) (Z	Zip)																	
		Table	e I - N	lon-Deriv	ative S	Secu	ırities A	quired	, Dis	posed o	f, or	Ben	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3)  2. Trans Date (Month/I					y/Year) if an		eemed ution Date, , th/Day/Yea	3. Transaction Code (Instr. 8)  4. Securi Disposed and 5)					3, 4 So B		5. Amount of Securities Beneficially Owned		nership Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount		(A) or (D)	Price	•	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(111501.4)				
Common Stock 08/16						013		P		2,000		A	\$17.45		2,000			D		
Common Stock 08/19/20						013		P		2,000		A	\$17.5		4,000			D		
Common Stock 08/20					013			P		40		A	\$17.5		5 4,040		D			
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)	if any	eemed tion Date, h/Day/Year)	4. Transaction Code (Instr. 8)		5. Numbe of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expira (Month		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		g nstr.	Secu		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Di or (I) 4)	vnership rm: rect (D) Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V (A) (D) Exercisable Date Tit		Title	or Nu of	mber ares													

Explanation of Responses:

/s/ Michael Alrutz, attorney-

in-fact

\*\* Signature of Reporting Person Date

08/20/2013

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).