## FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*     Trost Timothy W.						2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [ CMRX ]									all appli Directo	cable)	g Person(s) to Issue 10% Own Other (spe		wner
	MERIX, IN			3. Date of Earliest Transaction (Month/Day/Year) 08/25/2014									below) below)  Sr. Vice President and CFO						
2505 MERIDIAN PARKWAY, SUITE 340						4. If Amendment, Date of Original Filed (Month/Day/Year)									vidual or Joint/Group Filing (Check Applicable				
(Street) DURHA	M N	C :	27713		_										Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S	tate)	(Zip)																
		Tab	le I - I	Non-Deri	vativ	e Sec	uriti	ies A	cquire	ed, D	isposed o	of, or E	enefic	ally	Owned	t			
Date		2. Transact Date (Month/Day		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			Benefic Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	mon Stock 08/25/20			014	.4		M <sup>(1)</sup>		5,000(1)	A	\$2.3	5	5,629			D			
Common	Common Stock 08/2:			08/25/2	014	14			S <sup>(1)</sup>		5,000(1)	D	\$25.13	25.1343(2)		629		D	
		Т	able								sposed of , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed Ition Date, h/Day/Year)	4. Transa Code ( 8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares	nber					
Stock Option (Right to	\$2.35	08/25/2014			M			5,000	(3	3)	04/06/2021	Commo Stock	n 5,00		\$0	114,014	4	D	

## **Explanation of Responses:**

- 1. The sales reported in the Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 5, 2013.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$24.19 to \$25.57 inclusive. The reporting person undertakes to provide to CMRX, any security holder of CMRX, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote to this Form 4.
- 3. In accordance with its terms, the shares underlying the option are subject to vesting as follows: 1/4th of the shares vest one year after July 26, 2010; the remainder of the shares vest in equal monthly installments thereafter over the next three years.

08/25/2014 /s/ Timothy Trost

\*\* 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.