(City)

(State)

(Zip)

FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

				1 1100									company Act		71 1001							
Name and Address of Reporting Person*     Canaan VII L P					2. Issuer Name <b>and</b> Ticker or Trading Symbol CHIMERIX INC [ CMRX ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner							
(Last) (First) (Middle) 285 RIVERSIDE AVENUE, SUITE 250					Date /23			iest Tra	ansa	ction	(Mon	th/Day/Year)		r (specify v)								
203 KIV.	EKSIDE A	vence, some.	230		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WESTPORT CT 06880																Form filed by One Reporting Person  X Form filed by More than One Reporting Person						
(City)	(S	tate) (	Zip)																			
		Tab	e I	- Non-Deriv	ativ	e S	ес	urit	ies A	cqu	iired	l, Di	sposed of	f, or B	enefi	iall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yes				Exec ar) if an		emed ion D n/Day/			nsact de (In		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Sec Ber Ow		Amount of curities neficially ned		wnership m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership			
										de	v	Amount	(A) or (D) Price					(Instr. 4)		(Instr. 4)		
Common Stock 1			10/23/201	.3				5	S		674,771	D	\$15.	51(1)	2,58	2,584,990		I	See footnote <sup>(2)</sup>			
		Ta	ble	II - Derivat						•	,		oosed of, o			•	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of Derivative Security		Exe if a	. Deemed ecution Date,	4. Tran	4. Transaction Code (Instr.		5. of De Se Ac (A) Dis of (In	5. Number		6. Date Exe Expiration (Month/Day		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. of De Se (In	Price f erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	e	v	(A)	) (D)		)ate Exerci	sable	Expiration Date	Title	Amour or Number of Shares	r						
	nd Address o	of Reporting Person	*		,				•									,			•	
(Last)	ERSIDE A	(First) VENUE, SUITE	250	(Middle)																		
(Street) WESTPO	ORT	СТ		06880																		
(City)		(State)		(Zip)																		
		of Reporting Person Pers VII LLC	*																			
(Last) 285 RIV	ERSIDE A	(First) VENUE, SUITE	250	(Middle)																		
(Street) WESTPO	ORT	СТ		06880																		

## **Explanation of Responses:**

- 1. The Reporting Person sold shares to the underwriters in connection with a registered public offering pursuant to the Issuer's Registration Statement on Form S-1 (No. 333-191616).
- 2. Canaan Partners VII LLC (Canaan VII) is the sole General Partner of Canaan VII L.P. (together with Canaan VII, the "Canaan Entities") and each may be deemed to have sole voting and investment power over the securities held by the Reporting Person. Wende S. Hutton, a manager of Canaan VII, serves as the representative of the Canaan Entities on the Issuer's board of directors.

By: Canaan VII L.P., By:
Canaan Partners VII LLC, its
sole general partner, /s/ Jaime
Slocum, Attorney-in-Fact
By: Canaan Partners VII LLC,
it sole general partner, /s/
Jaime Slocum, Attorney-in
10/23/2013

\*\* Signature of Reporting Person Dat

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.