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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CANTEX PHARMACEUTICALS</u> , <u>INC.</u>					2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [CMRX]									ationship k all app Direc	,	g Pers	()		
(Last) (First) (Middle) 1792 BELL TOWER LANE					3. Date of Earliest Transaction (Month/Day/Year) 09/14/2021									Office below	er (give title v)		Other (below)	specify	
	VESTON FL 33326			4. If <i>F</i>									6. Indi Line) X	Form Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (2	<u>z</u> ip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I 5)			s Acqu f (D) (li	ired (A nstr. 3,) or 4 and	5. Amount of Securities Beneficially Owned Follow Reported		Form	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	or F	rice	Transa	ction(s) 3 and 4)			(111301. 4)
Common Stock, par value \$0.001 09/14/20					.021)21			S		6,500,000) I)	\$5.75	75 3,500,000			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)	ative Conversion Date Executity or Exercise (Month/Day/Year) if any		emed 4. Transac Code (I 8)		Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

/s/ Juan F. Rodriguez, Chief Financial Officer

09/16/2021

** 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.