FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

gton, D.C. 20549	OMB APP	ROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

3235-0287 OMB Number: 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). 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					2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [CMRX]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
WIARIC	EKINES	1			1					_					X	Direc	ctor		10% C	wner		
(Last) (First) (Middle) C/O CHIMERIX, INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/27/2014										Office	ficer (give title low)		Other (specify below)				
2505 ME	RIDIAN PA	ARKWAY, SUIT	E 340		4. If	Ame	endment,	Date of	f Origina	l Filed	I (Month/Da	ay/Ye	ear)		6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	` '														X Form filed by One Reporting Person							
DURHA:	M NO		7713												Form Pers	n filed by Mor on	re than	One Rep	orting			
(City)	(St	ate) (2	Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution (ay/Year) if any		Deemed ecution Date, ny onth/Day/Year)				ies Acquired (A) o Of (D) (Instr. 3, 4			and Secu Bene		cially d Following	Form: (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	- 1	Transa	action(s) 3 and 4)		(Instr. 4)			
Common	Stock			05/27/	/2014				P		10,000)	A	\$14	.22	6	8,451	D				
		Та									sed of, onvertib				y Ov	vned						
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Executive or Exercise (Month/Day/Year) if any		3A. Deem Execution if any (Month/Da	n Date, Transacti Code (Ins			on of		6. Date E Expiratio (Month/D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		vative (9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ow For Oir or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Codo	v	(0)		Date		Expiration	Title	or Nur of	ount								

Explanation of Responses:

/s/ Michael Alrutz, attorney-in-

** Signature of Reporting Person

Date

05/28/2014

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.