FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL							
l	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

1. Name ar		2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [CMRX]									all appli Directo	nship of Reporting applicable) Director Officer (give title		Person(s) to Issuer 10% Owner Other (specify						
	(First) (Middle) CHIMERIX, INC. MERIDIAN PARKWAY, SUITE 340						3. Date of Earliest Transaction (Month/Day/Year) 08/25/2014									vice President and CFO		` '		
(Street) DURHAM NC 27713					4. If Amendment, Date of Original Filed (Month/Day/Year) 08/26/2014									Form f	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				ion	2A. Deemed Execution Date			3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amo Securit Benefic Owned		unt of es ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 08/25/201						4		M ⁽¹⁾		5,000(1)	A	\$2.3	15	8,1	3,182(2)		D			
Common	Stock			08/25/20	014				S ⁽¹⁾		5,000(1)	D	\$25.13	43 ⁽³⁾	3(3) 3,182(2)		D			
		Т	able								sposed of				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed Ition Date, h/Day/Year)	4. Transa Code (8)			vative urities uired or oosed O) tr. 3, 4	6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e Coss Fully Do	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	ode V (A)		(D)	Date Exercisable		Expiration Date	Title	Amou or Numbe of Shares	er						
Stock Option (Right to Buy)	\$2.35	08/25/2014			M			5,000	(4))	04/06/2021	Commo Stock	5,00	0	\$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. This amendment has been prepared to amend the Amount of Securities Beneficially Owned Following Reported Transaction(s).
- 3. 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.
- 4. 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.

/s/ Michael Alrutz, Attorney-09/29/2014 in-Fact

** 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.