FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigton,	D.C.	20049

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					- Oi	0000	1011 00	o(11) of the	1110	Council	COII	ipany Act	OI IS	770	Т						
1. Name and Address of Reporting Person*  Sherman Michael A.					2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [ CMRX ]										5. Rel (Chec	ationship of k all applica	Reporting Person(s) to Issuer ble)			er	
SHEITH	in when	<u> </u>			[ emar]							X	Director			10% Ov	/ner				
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)								X	Officer ( below)	Officer (give title below)			pecify			
2505 MERIDIAN PARKWAY, SUITE 100 07/25/2022										Ch	ief Exec	utive	Officer								
, , , , , , , , , , , , , , , , , , , ,																					
(Street)														ividual or Jo	Joint/Group Filing (Check Applicat			licable			
DURHA	M N	C	27713		07//	/26/2	2022									Line)	Form fil	od by Opo	Dono	rting Persor	
DOMIN		C	2//13															•		•	
(City)	(S	State)	(Zip)		Form filed by More than One Reporting Person												ung				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
in this or county (mounty)		2. Transa Date (Month/D			2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.							s lly ollowing	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
				Code				v	Amount (A) or (D)		Pr	ice	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)				
Common Stock				07/25	5/2022				М		100,00	00	Α	A \$2.09		125,364(1)			D		
Common Stock													102		102,995(2)		I	By Sherman Investors LLC			
			Table II -	Derivat	ive	Sec	uriti	es Acq	uir	ed, Di	ispo	sed of,	, or	Bene	ficia	ally C	wned				
				(e.g., pı	uts,	cal	ls, w	arrants	s, o	ption	s, c	onverti	ble	secu	rities	s)					
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if an		3A. Deemed Execution Day if any (Month/Day/	.   Co	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		r) Of U D		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
															Amou or	ınt		(Instr. 4)	1011(3)	ı	
				Co	de \	v	(A)	(D)	Da Ex	te ercisable		xpiration ate	Title	•	Numb of Sh						
Employee Stock Option (Right to Buy)	\$2.09	07/25/2022		N	1			100,000		(3)	0-	4/07/2029		nmon ock	100,	000	\$0.00	1,150,0	000	D	
Explanatio	n of Respons	ses:																			

- 1. Includes 5,147 shares acquired under the Issuer's Employee Stock Purchase Plan (the "ESPP") on September 10, 2020, 5,147 shares acquired under the Issuer's ESPP on March 10, 2021, 5,147 shares acquired under the Issuer's ESPP on September 10, 2021 and 5,233 shares acquired under the Issuer's ESPP on March 10, 2022.
- $2.\ A\ Form\ 4\ filed\ on\ 07/26/2022,\ mistakenly\ did\ not\ report\ indirect\ holdings\ held\ by\ Sherman\ Investors\ LLC.$
- 3. One-fourth of the shares subject to the stock option vest and become exercisable on the first anniversary of the date of grant, and the remaining shares vest in 36 equal monthly installments thereafter.

## Remarks:

/s/ Michael Alrutz, Attorney-in-07/27/2022

fact

\*\* Signature of Reporting Person

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.