FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL									
	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(h)

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  Trost T  (Last)	- <u>C1</u>	HIM	ERI Earlie	X IN	<u>C</u> [ cı	MRX	ng Symbol  ith/Day/Year)		5. Relationship of Reporting Person(s) to Iss (Check all applicable)  Director 10% Ov X Officer (give title below)  Sr. Vice President and CFO				vner							
C/O CHIMERIX, INC.  2505 MERIDIAN PARKWAY, SUITE 340  (Street)  DURHAM NC 27713  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - I	Non-Deri	vative	e Sec	uriti	ies A	cquire	d, D	isposed o	of, or B	eneficia	ılly (	Owned	i				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye						Execution Date			3. Transactio Code (Inst		4. Securities Disposed Of		Benef Owner		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 06/25/201							4		M <sup>(1)</sup>		5,000(1)	A	\$2.35	2.35		5,629		D		
Common Stock 06/25/201							.4		S <sup>(1)</sup>		5,000(1)	D	\$22.739	.7394 <sup>(2)</sup>		629		D		
		7	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 tion Date, n/Day/Year)		ansaction de (Instr.		umber vative urities uired or oosed o) tr. 3, 4 5)	6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							
Stock Option (Right to	\$2.35	06/25/2014			M			5,000	(3)		04/06/2021	Common Stock	5,000		\$0	124,014	1	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. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$22.24 to \$23.23 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.
- 3. 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, Attorneyin-Fact 06/26/2014

\*\* Signature of Reporting Person Dat

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.