FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average	hurdon										

Check this box if no longer subject t	C
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

<u> </u>							
OMB Number: 3235-028							
Estimated average burden							
hours per response:	0.5						

1. Name and Address of Reporting Person  Trost Timothy W.						CHIMERIX INC [ CMRX ]										cable) or (give title	y r eis	10% Ov Other (s	vner	
(Last) (First) (Middle) C/O CHIMERIX, INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/26/2013								X Office (give title Office (specify below) Sr. VP and CFO						
2505 MERIDIAN PARKWAY, SUITE 340							ndmai	nt Date	of Origin	nal Fi	iled (Month/D		6. Individual or Joint/Group Filing (Check Applicable							
(Street) DURHA (City)			27713 (Zip)		-   4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		Tab	le I - N	Non-Deri	vative	e Sec	urit	ies A	cauire	d. D	isposed (	of. or B	enefic	iallv	Owned					
1. Title of Security (Instr. 3) 2. Transa Date				2. Transact	ion	2A. D Execu	Deemed cution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an		I (A) or	5. Amo Securit Benefic Owned		unt of ies ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 12/26/20						13			М		5,000	Α	\$2.3	35	5.	5,000		D		
Common Stock 12/26/20					013	13		S <sup>(1)</sup>		5,000	D	\$15.21	5.2145(2)		0		D			
		T	able I								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y [0	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	code V		(D)	Date Exercis	isable	Expiration Date	Title	Amou or Numb of Share	er						
Stock Option (Right to Buy)	\$2.35	12/26/2013			M			5,000	(3)		04/06/2021	Commo Stock	5,00	0	\$0	154,014	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. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.67 to \$15.49, 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, Attorney-12/30/2013 in-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.