FORM 4

UNITED STA

Washington, D.C. 20549

ATES SECURITIES AND EXCHANGE COMMISS	ION

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to exist the office of the indicate of the restrict of the office of the section. to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [CMRX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O CHIMERIX, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/07/2025								_	Officer (give title below) COO and CCO						
2505 MERIDIAN PKWY, SUITE 100						A If Amandment Date of Original Filed (Month Do. 26 c.)								C. Individual on Inint/Convertiling (Charles & Charles						
(Street) DURHAM NC 27713					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Та	ble I - Non-	-Derivat	ive S	ecuritie	s Ac	quired,	Dis	osed c	f, or	Bene	ficially	Owned						
Date					•		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	s Illy ollowing	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or D)	Price	Transacti (Instr. 3 a	ion(s)			113ti. 4)		
Common Stock 01/07					7/2025		Α		54,275	5(1)	A	\$0	57,5	01(2)		D				
			Table II - D	erivativ e.g., put										Owned		,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code	action (Instr.			6. Date Ex Expiration (Month/Da		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				Code	v	(A)		Date Exercisabl		xpiration ate	Title	Or No	mount umber Shares		(Instr. 4)	on(s)				
Stock Option (Right to Buy)	\$3.66	01/07/2025		A		325,000		(3)	0	1/06/2035	Comm		25,000	\$0	325,00	00	D			

Explanation of Responses:

- 1. The shares being reported are being issued pursuant to restricted unit awards ("RSUs"), each one of which represents a contingent right to receive one share of the Issuer's common stock. 13,568 shares subject to the RSUs will vest on the one-year anniversary of the date of grant, 13,569 shares subject to the RSUs will vest on the second-year anniversary of the date of grant, 13,569 shares subject to the RSUs will vest on the third-year anniversary of the date of grant, and 13,569 shares subject to the RSUs will vest on the fourth-year anniversary of the date of grant.
- 2. Includes 3,226 shares acquired under the Issuer's Employee Stock Purchase Plan on September 10, 2024.
- 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.

/s/ Michael Alrutz, Attorney-in-

01/10/2025

** 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.