## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-0								
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).

### 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*  DEMSKI MARTHA J					2. Issuer Name <b>and</b> Ticker or Trading Symbol CHIMERIX INC [ CMRX ]											plicable)	porting Person(s) to Issuer	
(Last)	,		Middle	:)	3. Date of Earliest Transaction (Month/Day/Year) 09/01/2015										Officer (give title below)		Other below	(specify
C/O CHIMERIX, INC. 2505 MERIDIAN PARKWAY, SUITE 340						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person				
(Street)	M No		27713	3										X	Form filed by One Repo Form filed by More than Person			•
(City)	(Si	rate) (	Zip)															
			le I -	Non-Deri						Di	<del>-</del>				_			I
1. Title of Security (Instr. 3)		2. Transact Date (Month/Day	/Year)	Execu if any	a. Deemed ecution Date, any onth/Day/Year)		3. Transaction Code (Instr. 8)						5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	Price	•	Repo Trans		(Instr. 4)	(Instr. 4)
Common Stock			09/01/2	015			М		2,000	) A	\$1	\$1.53		2,000	D			
Common Stock			09/01/2015				S <sup>(1)</sup>		1,562	2 D \$4		3.1 <sup>(2)</sup>	438		D			
Common	Common Stock 09		09/01/2	2015				S <sup>(1)</sup>		438	D	\$48	48(3)		0	D		
Common Stock														1	4,788	I	By the Martha J Demski Trust u/a 10/01/94	
		Ta	able	II - Deriva (e.g., p					,	•	osed of convert	•		•	wned	l		
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/Year)		4. Transac Code (li 8)		Number		6. Date Ex Expiration (Month/D	n Dat		7. Title a Amount Securitie Underlyi Derivativ Security and 4)	of es ng re	of Der Sec	Price erivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	V (A			Date Exercisab		Expiration Date	Title	Amoun or Numbe of Shares	er				
Stock Option (Right to Buy)	\$1.53	09/01/2015			M			2,000	(4)		06/25/2018	Common Stock	2,000	\$	0.00	3,126	D	

#### **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule10b5-1 trading plan adopted by the reporting person on September 15, 2014.
- 2. The range of sale prices received is \$47.39 to \$48.38. Upon request by the SEC staff, the Issuer, or any security holder of the Issuer, full information will be provided regarding the number of shares purchased or sold at each separate price.
- 3. The range of sale prices received is \$48.39 to \$48.69. Upon request by the SEC staff, the Issuer, or any security holder of the Issuer, full information will be provided regarding the number of shares purchased or sold at each separate price.
- 4. Immediately exercisable.

# Remarks:

/s/ Michael Alrutz, Attorney-09/03/2015 In-Fact

\*\* Signature of Reporting Person

Date

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.