CHIMERIX INC Form 4 January 20, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

Washington, D.C. 20549

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

(City)

See Instruction

1. Name and Address of Reporting Person * **MARIO ERNEST**

> (First) (Middle)

C/O CHIMERIX, INC., 2505 MERIDIAN PARKWAY, SUITE 340

(Zip)

(Street)

(State)

2. Issuer Name and Ticker or Trading Symbol

CHIMERIX INC [CMRX]

(Month/Day/Year) 01/16/2015

Filed(Month/Day/Year)

3. Date of Earliest Transaction

4. If Amendment, Date Original

5. Relationship of Reporting Person(s) to

(Check all applicable)

10% Owner

Other (specify

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

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Number:

Expires:

response...

6. Individual or Joint/Group Filing(Check Applicable Line)

X_ Director

Officer (give title

Issuer

X Form filed by One Reporting Person Form filed by More than One Reporting

DURHAM, NC 27713

(City)	(State)	Zip) Table	I - Non-D	erivative (Secur	ities Acqu	uired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securit n(A) or Di (Instr. 3,	(A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	01/16/2015		M		A		109,574	D	
Common Stock	01/16/2015		M	1,500	A	\$ 23.26	111,074	D	
Common Stock	01/16/2015		M	258	A	\$ 23.26	111,332	D	

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

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(9-02)

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displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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/Year)	4. Transactio Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day/	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 5.05	01/16/2015		M	3,521	<u>(1)</u>	02/03/2023	Common Stock	3,521
Stock Option (Right to Buy)	\$ 23.26	01/16/2015		M	1,500	<u>(2)</u>	06/19/2024	Common Stock	1,500
Common Stock (Right to Buy)	\$ 23.26	01/16/2015		M	258	(2)	06/19/2024	Common Stock	258

Reporting Owners

Reporting Owner Name / Address	Relationships					
and the second of the second o	Director	10% Owner	Officer	Other		
MARIO ERNEST C/O CHIMERIX, INC. 2505 MERIDIAN PARKWAY, SUITE 340 DURHAM, NC 27713	X					

Signatures

/s/ Michael Alrutz,
attorney-in-fact 01/20/2015

**Signature of Reporting Person Date

Reporting Owners 2

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Explanation of Responses:

- * 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).
- (1) In accordance with its terms, the shares underlying the option are subject to vesting as follows: the shares vest at a rate of 1/48th per month during the four years following February 4, 2013.
- (2) The shares subject to the option vest in a series of twelve equal monthly installments from the date of grant on June 20, 2014 such that the option is fully vested on the one-year anniversary of the date of the grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.