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CHIMERIX Form 4	INC											
March 16, 20	016											
FORM	14						~~~ .		~~ <i>~</i> ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	OMB AF	PROVAL	
	U	NITED	STATES			AND EX(, D.C. 20)		NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may com <i>See</i> Instr 1(b).	ger o S 16. or []] ons tinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type]	Responses)										
1. Name and Address of Reporting Person <u>*</u> MARIO ERNEST				2. Issuer Name and Ticker or Trading Symbol CHIMERIX INC [CMRX]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)			-	-		(Check	all applicable	2)	
C/O CHIMERIX, INC., 2505 MERIDIAN PARKWAY, SUITE 100			5	3. Date of Earliest Transaction (Month/Day/Year) 03/15/2016					XDirector10% Owner Officer (give titleOther (specify below) below)			
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
DURHAM,	, NC 277	13							Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative S	Secur	ities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ction Date Day/Year)	any	Date, if	3. Transactic Code (Instr. 8)	4. Securiti por Dispose (Instr. 3, 4	ed 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					Code V	Amount	(D)	Price \$		_		
Stock	03/15/2	016			Р	20,000	A	5.1314 (1)	287,919	D		
Common Stock	03/16/2	016			Р	5,000	А	\$ 4.7796 (2)	292,919	D		

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

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	Amou Under Secur	tle and unt of crlying rities c. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repor	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Re	eporting Own	er Name / Address	Director	Relation 10% Owne	-	r Other					

MARIO ERNEST C/O CHIMERIX, INC. 2505 MERIDIAN PARKWAY, SUITE 100 DURHAM, NC 27713

Signatures

/s/ Michael Alrutz,	03/16/2016
Attorney-in-Fact	05/10/2010

**Signature of Reporting Person

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).

Х

Date

- (1) The range of purchase prices paid is \$5.09 to \$5.15. 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.
- (2) The range of purchase prices paid is \$4.77 to \$4.78. 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.

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.