SEC Form 4										
FORM 4 UNITED STA				SECURITIES Washingt	SION	OMB APPROVAL				
Check this box if r Section 16. Form obligations may co Instruction 1(b).		STAT	Filed pursua	F CHANGES Int to Section 16(a) of Int to 30(h) of the Int		OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Addres <u>Grais Linda</u>	s of Reporting Perso	n*		ier Name and Ticke wus Pharmace				tionship of Rep all applicable) Director	oorting Person(s) to Is 10% C	
(Last)	(Last) (First) (Middle)				ction (Month/D	lay/Year)	Officer (give title Other (specify below) below)			
C/O CORVUS PHARMACEUTICALS, INC. 863 MITTEN ROAD, SUITE 102			4. If A	mendment, Date of	Original Filed	(Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person			
(Street) BURLINGAME	СА	94010						Form filed by Person	y More than One Rep	orting
			Rul	e 10b5-1(c)⊺	Fransacti	on Indication				
(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						
	Ta	able I - Nor	n-Derivative S	Securities Acq	uired, Disp	oosed of, or Benefi	cially	Owned		
1. Title of Security (Instr. 3) Date (Month				2A. Deemed Execution Date, if any	3. Transaction Code (Instr.			5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial

				th/Day/Year)	if any (Month/Day/Year	Code (Instr. 8)		5)			Beneficially Owned Following Reported		(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price	Transactie (Instr. 3 a		(1150. 4)		
	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of	6. Date Ex Expiratior (Month/Da	n Date	r)	7. Title and <i>J</i> of Securities Underlying Derivative S (Instr. 3 and	ecurity	Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned	Ownershi Form:	Beneficia Ownershi t (Instr. 4)	

(instr. 3)	Derivative Security		(Month/Day/Year)	8)		Acquire (A) or Dispose of (D) (II 3, 4 and	ed ed nstr.			(Instr. 3 and 4)		(instr. 5)	Owned Following Reported Transaction(s) (Instr. 4)		(Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$2.12	06/13/2024		A		15,000		(1)	06/13/2034	Common Stock	15,000	\$0	15,000	D		

Explanation of Responses:

1. The underlying shares subject to the option vest and become exercisable as to 100% of the total number of shares subject to the option on the earlier of (i) the first anniversary of the grant date or (ii) the date of the 2025 Annual Meeting of the Issuer's stockholders, assuming continuous service as a director until such vesting date.

<u>/s/ Leiv Lea, as Attorney-in-</u> Fact for Linda S. Grais	<u>06/17/2024</u>
** Signature of Reporting Person	Date

** 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.