FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSH
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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 an MILLE		2. Issuer Name and Ticker or Trading Symbol Corvus Pharmaceuticals, Inc. [CRVS]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner									
(Last) CORVUS			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2017									X Officer (give title below) President			Other (specify below)				
(Street) BURLINGAME CA 94010 (City) (State) (Zip)						- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
		`			on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed		
Date						. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr.				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
										Code	v	Amount	(A) or (D)	Price			rted action(s) 3 and 4)		(Instr. 4)
Common Stock, \$0.0001 par value 06.						5/09/2017				P		5,000	A	\$9	\$9.95		2,293(1)	I	By Trust ⁽²⁾
Common Stock, \$0.0001 par value					06/09/2017				P		3,784	A	\$9	\$9.89		6,077(1)	I	By Trust ⁽²⁾	
Common Stock, \$0.0001 par value					06/12/2017				P		11,216	A	\$9.8	\$9.8239(3)		7,293(1)	I	By Trust ⁽²⁾	
Common Stock, \$0.0001 par value					06/13/2017				P		2,500	A	\$9	\$9.75		9,793(1)	I	By Trust ⁽²⁾	
Common Stock, \$0.0001 par value 0						06/13/2017				P		2,500	A	\$10	\$10.14		02,293(1)	I	By Trust ⁽²⁾
			Та	ble II								oosed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	on l e (3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title Amoun Securit Underly Derivat Securit and 4)	t of ies /ing	Deri Sec (Inst	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	, v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Number of Shares					

Explanation of Responses:

- 1. A portion of these shares is subject to a right of repurchase held by the Issuer.
- 2. These shares are held by Richard A. Miller and Sandra J. Horning, Trustees of the Miller-Horning Family Trust u/a/d January 25, 1985 (the "Miller-Horning Trust"). Dr. Miller has shared voting, investment and dispositive power over the shares held by the Miller Horning Trust.
- 3. The price reported in Column 4 is a weighted price. These Shares were purchased in multiple transactions at prices ranging from \$9.69 to \$9.94 inclusive. Upon request, the Reporting Person undertakes to provide the Issuer, any security holder of the Issuer, or the SEC full information regarding the Shares purchased at each separate price within the range set forth in this footnote.

Remarks:

Leiv Lea, as Attorney-in-Fact for Richard A. Miller

06/13/2017

** 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.