FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
asimigton,	D.C.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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).

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*  Mitchell Edith P.					2. Issuer Name and Ticker or Trading Symbol Corvus Pharmaceuticals, Inc. [ CRVS ]								telationship eck all appli X Directo	•		son(s) to Iss 10% Ow					
(Last)	•	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2023								Officer below)	(give title		Other (s below)	pecify			
C/O CORVUS PHARMACEUTICALS, INC. 863 MITTEN ROAD, SUITE 102					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person								
(Street) BURLINGAME CA 94010														Form filed by More than One Reporting Person							
(City)	(S	<i>,</i>	(Zip)			Rule 10b5-1(c) Transaction Indication  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.															
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				action	tion 2A. Deemed Execution Date,			3. Transacti Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			red (A) or	5. Amou Securitie Benefici	nt of 6. es Fe ally (D	Form (D) or	Ownership orm: Direct 0) or Indirect 1 (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) o (D)	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)							
		Т							uired, Dis , options					Owned							
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares								
Stock Option (Right to Buy)	\$2.49	06/15/2023			A		15,000		(1)	06/	15/2033	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 2024 Annual Meeting of the Issuer's stockholders, assuming continuous service as a director until such vesting date.

/s/ Leiv Lea, as Attorney-in-Fact for Edith P. Mitchell

06/20/2023

\*\* 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.