Corvus Pharmaceuticals, Inc. Form 3 March 22, 2016 FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB 3235-0104 Number: January 31, Expires: 2005 Estimated average

Reporting Person

0.5

burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response...

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> MILLER RICHARD A MD	2. Date of Event RequiringStatement(Month/Day/Year)03/22/2016	3. Issuer Name and Ticker or Trading Symbol Corvus Pharmaceuticals, Inc. [CRVS]			
(Last) (First) (Middle)		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O CORVUS PHARMACEUTICALS, INC., 863 MITTEN ROAD, SUITE 102		(Check all applicable) X_ Director 10% Owner X_ Officer Other			
(Street)		(give title below) (specify below) President and CEO	6. Individual or Joint/Group		
BURLINGAME, CA 94010			Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One		

(City)	(State)	(Zip)	Table I - Non-Deriva	tive Securit	ies Beneficially Owned
1.Title of Secur (Instr. 4)	ity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Sto	ock, \$0.0001	par value	718,228 (1)	Ι	By Trust (2)

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

> 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 control number.

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

SEC 1473 (7-02)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)

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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Series A Convertible Preferred Stock	(<u>3)</u>	(4)	Common Stock	266,310	\$ 0	Ι	By Trust (2)
Series B Convertible Preferred Stock	(<u>3)</u>	(4)	Common Stock	62,455	\$ 0	Ι	By Trust (2)

Reporting Owners

Reporting Owner Name / Address		Relationships				
r of the second second	Director	10% Owner	Officer	Other		
MILLER RICHARD A MD C/O CORVUS PHARMACEUTICALS, INC. 863 MITTEN ROAD, SUITE 102 BURLINGAME, CA 94010	ÂX	Â	President and CEO	Â		
Signatures						
/s/ Leiv Lea, as Attorney-in-Fact for Richard A. Miller		03/22/20	016			
** Signature of Reporting Person		Date				

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) A portion of these shares is subject to a right of repurchase held by the Issuer.

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
(2) (the "Miller-Horning Trust"). Dr. Miller has shared voting, investment and dispositive power over the shares held by the Miller-Horning Trust.

(3) The Series A Convertible Preferred Stock and Series B Convertible Preferred Stock automatically convert into shares of Issuer's Common Stock, for no additional consideration, on a 1:1 basis immediately prior to the consummation of Issuer's initial public offering.

(4) The expiration date is not relevant to the conversion of these securities.

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.