Edgar Filing: Morrison Scott W - Form 4

Morrison Sc	cott W						
Form 4	10						
June 25, 201	OMB APPROVA OMB 3235-0						
Check th if no lon subject to Section Form 4 of Form 5 obligation may con <i>See</i> Instru 1(b).	section 170	MENT OF CH rsuant to Sectio (a) of the Publi	Washington, D.C. 20549 IANGES IN BENEFICIAL O SECURITIES on 16(a) of the Securities Excha ic Utility Holding Company Ac ie Investment Company Act of	ange Act of 1934, t of 1935 or Section	Expires: Januar Estimated average burden hours per response		
			Issuer Name and Ticker or Trading bol vus Pharmaceuticals, Inc. VS]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	. , , ,	(Mor 06/2 C., 863	ate of Earliest Transaction nth/Day/Year) 21/2018	X Director Officer (give below)	title 10% Owner Other (specify below)		
			Amendment, Date Original l(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
BURLING	AME, CA 94010			Person	fore than One Reporting		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities	Acquired, Disposed of	, or Beneficially Owned	1	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		Code Disposed of (D)	SecuritiesFBeneficially(IOwned(IFollowing(IReportedTransaction(s)(Instr. 3 and 4)	. Ownership 7. Nature form: Direct Indirect D) or Indirect Beneficia I) Ownershi Instr. 4) (Instr. 4)	ıl	
Reminder: Re	port on a separate line	e 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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Morrison Scott W - Form 4

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. Transacti Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 12.5	06/21/2018		А	15,000	<u>(1)</u>	06/21/2028	Common Stock	15,000
Reporting Owners									

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Morrison Scott W C/O CORVUS PHARMACEUTICALS, INC. 863 MITTEN ROAD, SUITE 102 BURLINGAME, CA 94010	Х				
Signatures					
/s/ Leiv Lea, as Attorney-in-Fact for Scott W. Morrison		06/25/2	2018		
**Signature of Reporting Person		Date			
Evelopetion of Deenoneee	_				

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).

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
 (1) the earlier of (i) the first anniversary of the grant date or (ii) the date of the 2019 Annual Meeting of the Issuer's stockholders, assuming continuous service as a director until such vesting date.

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.

E S (