FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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neck this box if no longer subject
Section 16. Form 4 or Form 5
ligations may continue. See
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

Name and Address of Reporting Person* LEA LEIV						2. Issuer Name and Ticker or Trading Symbol Corvus Pharmaceuticals, Inc. [CRVS]									all appl Direct Office	ionship of Reportin all applicable) Director Officer (give title		10% Ov	vner
(Last) (First) (Middle) C/O CORVUS PHARMACEUTICALS, INC. 863 MITTEN ROAD, SUITE 102						3. Date of Earliest Transaction (Month/Day/Year) 03/16/2022												below)` Officer	. ,
(Street) BURLIN (City)	IGAME CA		4010 Zip)		4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indir Line) X					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of,	or Be	enef	cially	Own	ed			
Di				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		and Securi		ies cially Following	Form: Direct		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Pri	ce	Transaction(s) (Instr. 3 and 4)				(
Common Stock 03/				03/16/2	2022				P		35,160	A	\$1	.54(1)	85,360				By IRA ⁽²⁾
Common Stock				03/17/2022				P		13,878	A	\$1	.65 ⁽³⁾	99	9,238			By IRA ⁽²⁾	
Common Stock														12		49,206			By Trust ⁽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)	ative Conversion Date Execution Date or Exercise (Month/Day/Year) if any			ion Date,	Code (Inst				6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Dei Sed (Ins	Price of erivative ecurity istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code \		(A)	(D)	Date Exercisable		Expiration Date		Amou or Numb of Share	er					

- 1. The price reported in Column 4 is a weighted average price. The shares were purchased in multiple transactions at prices ranging from \$1.45 to \$1.60 inclusive. Upon request, the Reporting Person undertakes to provide the Issuer, any security holder of the Issuer, or the SEC full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 2. These shares are held by Leiv Lea IRA Contributory.
- 3. The price reported in Column 4 is a weighted average price. The shares were purchased in multiple transactions at prices ranging from \$1.62 to \$1.66 inclusive. Upon request, the Reporting Person undertakes to provide the Issuer, any security holder of the Issuer, or the SEC full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 4. These shares are held by Leiv Lea and Deborah Karlson, Trustees of the Karlson Lea Family Trust UTA dated February 11, 1998 (the "Karlson Lea Trust"). Mr. Lea has shared voting, investment and dispositive power over the shares held by the Karlson Lea Trust.

/s/ Leiv Lea

03/17/2022

** 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.