Rolfe Lindsey Form 4 March 21, 2019

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

0.5

Form 5 obligations may continue. See Instruction

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

burden hours per response...

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

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * Rolfe Lindsey

(First)

(Street)

(State)

2. Issuer Name and Ticker or Trading Symbol

Issuer

below)

(Middle)

(Zip)

Clovis Oncology, Inc. [CLVS]

(Check all applicable)

5. Relationship of Reporting Person(s) to

C/O CLOVIS ONCOLOGY,

3. Date of Earliest Transaction (Month/Day/Year) 03/20/2019

Director 10% Owner X_ Officer (give title Other (specify

INC., 5500 FLATIRON PARKWAY, SUITE 100

4. If Amendment, Date Original

See Remarks

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

BOULDER, CO 80301

(City)	(State)	^(Zip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Commo: Stock	n 03/20/2019		M	3,437	A	<u>(1)</u>	20,953	D	
Commo	n 03/20/2019		S	1,729 (2)	D	\$ 26.13	19,224	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number Doof 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 Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	03/20/2019(3)		M	3,437	(3)	(3)	Common Stock	3,437	\$

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Rolfe Lindsey C/O CLOVIS ONCOLOGY, INC. 5500 FLATIRON PARKWAY, SUITE 100 BOULDER, CO 80301

See Remarks

Signatures

/s/ Lindsey Rolfe 03/21/2019

**Signature of Date
Reporting Person

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).
- (1) Each Restricted Stock Unit represents the right to receive one share of Common Stock.
- Represents the shares automatically sold by the reporting person pursuant to an election to satisfy tax withholding obligations in connection with the vesting of the Restricted Stock Units listed in Table II. This sale does not represent a discretionary trade by the reporting person.
- On December 19, 2016, the reporting person was granted 55,000 Restricted Stock Units. 25% of such Restricted Stock Units vested on December 19, 2017, and the remainder vests in substantially equal installments over the 12 quarters immediately following such date.

Remarks:

Chief Medical Officer and Executive Vice President of Clinical and Preclinical Development and Pharmacovigilance Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

Reporting Owners 2

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