FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Rolfe Lindsey						2. Issuer Name and Ticker or Trading Symbol Clovis Oncology, Inc. [CLVS]											Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	`	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2018											X	below)			Other (specify below)		
C/O CLOVIS ONCOLOGY, INC.																See Remarks						
5500 FLATIRON PARKWAY, SUITE 100						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applica Line)						
(Street)																X	Form	filed by One	e Rep	porting Pers	son	
BOULD	ER C	0 8	80301													Form filed by More than One Reportine Person						
(City)	(S	tate) ((Zip)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Exe if ar	Deem cution ny onth/D	Transaction Di				urities A sed Of (. 3, 4 Se Be		Amount of ecurities eneficially wned		Ownership m: Direct or irect (I)	7. Nature of Indirect Beneficial Ownership			
									Code	,	v	Amour	nt (A) or (D)		Price	e 1	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common	2018	018		M			62	5	A	(1)		10,414			D							
Common Stock 06/06/20						018			F			316		D	\$47.7		10,098			D		
		Ta	able II	- Derivat (e.g., p													ned					
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. Transact Code (In 8)			6. Date Exercisal Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	Secur		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, (1 ((10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expi Date	iration	Title	or Nu of	ımber							
Restricted Stock Units	(1)	06/06/2018 ⁽²⁾			M			625	(2)			(2)	Comm		525	\$0.	00	6,875		D		

Explanation of Responses:

- 1. Each restricted stock unit represents the right to receive one share of Common Stock.
- 2. On March 27, 2017, the reporting person was granted 10,000 Restricted Stock Units. 25% of such Restricted Stock Units vested on March 1, 2018, 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

<u>/s/ Lindsey Rolfe</u> <u>06/08/2018</u>

** 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.