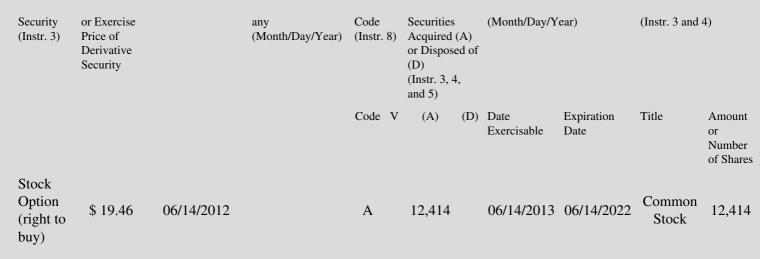
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McKinley Edward Form 4	d J									
June 15, 2012										
FORM 4	UNITED	STATES	SECU	RITIES A	AND EX	CHANGE			APPROVAL	
Check this have		Washington, D.C. 20549							3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATEM Filed put Section 17(rsuant to S (a) of the I	Section (Public U	SECUF 16(a) of th Itility Hol	RITIES ne Securit ding Cor	ties Excha	WNERSHIP OF nge Act of 1934, of 1935 or Secti 940	Estimated burden ho response	urs per	
(Print or Type Respon	nses)									
1. Name and Address of Reporting Person <u>*</u> McKinley Edward J			2. Issuer Name and Ticker or Trading Symbol			Ū.	5. Relationship of Reporting Person(s) to Issuer			
(Last) ((First)	Middle)	Clovis Oncology, Inc. [CLVS] 3. Date of Earliest Transaction				(Che	eck all applicable)		
C/O CLOVIS ON INC., 2525 28TH 100	NCOLOGY	,		Day/Year)	Tansaction		X Director Officer (giv below)		% Owner her (specify	
(BOULDER, CO	Street) 80301			endment, D onth/Day/Yea	-	ıl	6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		Person	
(City) (State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned	
	nsaction Date th/Day/Year)		ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	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	
Reminder: Report on	a separate line	e for each cl	ass of sec	urities bene:	Perso inforn requir	ns who res nation cont red to respo nys a curren	or indirectly. spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owner securities)	d		
1. Title of 2.	3. Trans	saction Date	e 3A. Dee	emed	4.	5. Number	of 6. Date Exerci	sable and	7. Title and Am	

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities

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Reporting Owners

Reporting Owner Name / Ad	dress		Relationsh		
		Director	10% Owner	Officer	Other
McKinley Edward J C/O CLOVIS ONCOLOGY 2525 28TH STREET, SUIT BOULDER, CO 80301		Х			
Signatures					
/s/ Edward J. McKinley	06/14/2012				
**Signature of Reporting Person	Date	e			

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).

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.