

Clovis Oncology, Inc.
 Form 4/A
 January 21, 2015

FORM 4

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

OMB APPROVAL

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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Allen Andrew R

(Last) (First) (Middle)

C/O CLOVIS ONCOLOGY,
 INC., 2525 28TH STREET, SUITE
 100

(Street)

BOULDER, CO 80301

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
 Clovis Oncology, Inc. [CLVS]

3. Date of Earliest Transaction
 (Month/Day/Year)
 01/15/2015

4. If Amendment, Date Original Filed(Month/Day/Year)
 01/20/2015

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
 ___X___ Officer (give title below) ___ Other (specify below)
 See Remarks

6. Individual or Joint/Group Filing(Check Applicable Line)
 ___X___ Form filed by One Reporting Person
 ___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
				(A) or (D)	Price		
				Code	V	Amount	
Common Stock	01/15/2015		S	300 ⁽¹⁾	D	\$ 65	181,619 D
Common Stock	01/16/2015		S	30,524 ⁽¹⁾	D	\$ 65.2675 ⁽²⁾	151,095 D
Common Stock	01/16/2015		S	49,176 ⁽¹⁾	D	\$ 66.2553 ⁽³⁾	101,919 D

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

each separate price within the range.

Remarks:

Executive Vice President of Clinical and Pre-Clinical Development and Chief Medical Officer

This Form 4/A restates the weighted average sale price of the shares sold by the Reporting Person within the price range set fo

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.