# FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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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 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respon	ses)													
1. Name and Address of Reporting Person *- CATLIN AVERY W			2. Issuer Name <b>and</b> Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) C/O CORBUS PHARMACEUTICALS HOLDINGS, INC, 100 RIVER RIDGE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2015					-		r (give title belo	ow)	Other (specify b	pelow)	
(Street) NORWOOD, MA 02062			4. If Amendment, Date Original 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 Person					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)	(A) or Disposed of		of	red 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following	6. Ownership Form: Direct (D)	Beneficial Ownership	
					Code	V	Amou	(A) or (D)	Price	(I)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock		06/09/2015			P		20,00	() I A	3.1	20,000			D	
indirectly.		Table II - D	erivative Seco	uritie		conta the fo	ained i orm dis	n this for splays a c	m are	not req	uired to re d OMB co	nformation espond un ntrol numb	less	EC 1474 (9- 02)
		(e	g., puts, calls							.y o whee				
1. Title of Derivative Security (Instr. 3)  1. Title of 2. Conversic or Exercise Price of Derivative Security	Date (Month/Day/	3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/		tion (	of	and Expiration Date (Month/Day/Year) US		Amo Unde Secu	itle and ount of erlying urities r. 3 and		9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4) D)	
			Code	V	(A) (D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares				
Reporting (	Owners													

Booking Occupy Name / Additions	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CATLIN AVERY W C/O CORBUS PHARMACEUTICALS HOLDINGS, INC 100 RIVER RIDGE DRIVE NORWOOD, MA 02062	X					

## **Signatures**

/s/ Avery Catlin	06/09/2015
Signature of Reporting	Date

## **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.