FORM 4

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

OMB APPROVAL
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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 Re | esponse | s) | | | | | | | | | | | | | | |
|---|---|--|--|---|-----------|---|---|---|---|--|--|---|--|--------------|--|---|
| 1. Name and Address of Reporting Person * Moran Sean F. | | | | 2. Issuer Name and Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| C/O CORBUS HOLDINGS, | 3. Date of Earliest Transaction (Month/Day/Year) 12/02/2015 | | | | | | | X Officer (give title below) Other (specify below) Chief Financial Officer | | | | | | | | |
| | 4. If Amen | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | idual or Joint | | g(Check Applica | ible Line) | | | |
| NORWOOD, MA 02062 | | | | | | | | | | | | _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | | (State) | (Zip) | | Ta | ble I - | Non- | -Deri | vative S | ecuriti | es Acqu | iired, Di | sposed of, or | Beneficially | Owned | |
| (Instr. 3) Date | | | . Transaction Date Month/Day/Year) | 2A. Deemed Execution D any (Month/Day | Date, if | te, if Code (Instr. 8 | | | 4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5) | | of (D) | Benefi Report | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | 6. Ownership Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | de | V | | | Price | | | | (I) (Instr. 4) | |
| Common Stoc | ck | 1 | 2/02/2015 | | | F | , | | 1,000 | A | \$ 1.7899 | 69,25 | 0 | | D | |
| (Instr. 3) Price | version xercise e of vative | 3. Transaction Date (Month/Day/Y | 3A. Deemed Execution D | Pate, if Trans Code | alls, was | 5. Nu of Deriv Securi Acqui (A) of Dispo | s Acquire rrants, opt 5. Number of Derivative Securities Acquired A) or Disposed of (D) Instr. 3, | | ained i form dis sposed of conver | n this is splays of, or B tible se on Date | eneficia curities 7. 2 An Un Sec | re not re ently va ally Own | 8. Price of Derivative Security (Instr. 5) | espond unl | of 10. Owners Form of Derivati Security Direct (or Indire | Ownershi (Instr. 4) D) |
| | | | | Cod | le V | (A) | (D) | Date Exe | e rcisable | Expirat Date | tion Tit | Amou or le Numb of Shares | er | | | |
| Reportin | ıg O | wners | | | | | | | | | | | | | | |
| Reporting Owner Name / Address | | | | | | Relationships Director 10% Owner Officer Other | | | | | | | | | | |
| Moran Sean F. C/O CORBUS PHARMACEUTICALS HOLDINGS, INC 100 RIVER RIDGE DRIVE NORWOOD, MA 02062 | | | | | | | .070 | Chief Financial Officer | | | | | Guier | | | |

Explanation of Responses:

Signatures

/s/ Sean Moran

**Signature of Reporting

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

12/03/2015 Date

** 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.