## FORM 4

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

OMB APPR	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

Name and Address of Reporting Person *  Jacques Rachelle Suzanne			2. Issuer Name and Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
500 RIVER	RIDGE DI	(First) RIVE		3. Date of Earliest Transaction (Month/Day/Year) 04/05/2019		C	Officer (give t	itle below)	Other (	specify below)					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ For	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
NORWOOD	), MA 0206											ore unum one re	porting 1 croon		
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3)		2. Transaction Date (Month/Day/Year		Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D) Owned Followin Transaction(s)			O Fe	wnership orm:	eneficial	
				(Month/Day	y/Year)	Code	. V	Amount	(A) or	(Instr. :	(Instr. 3 and 4) Direct (I or Indirect (I)		irect (D) O Indirect (I ) nstr. 4)		
Reminder: Repo	ort on a separ	ate line for each cla	ss of securities be	eneficially ow	ned dire	ctly or i	Perso	s form a	re not req		spond u		n contained orm displays		74 (9-02)
Reminder: Repo	ort on a separ	ate line for each cla	ss of securities be	eneficially ow	ned dire	ctly or i	Perso								74 (9-02)
1. Title of Derivative	2. Conversion	3. Transaction Date	Table II -  3A. Deemed Execution Date,	- Derivative S	Securiti calls, wa 5. N on of D	es Acqu rrants, umber	Perso in this a curr ired, Dis options, o 6. Date Expirat	posed of convertibe Exercisation Date	are not requalid OMB of the securition of the securities of the se	uired to rescontrol nun	spond unnber.  Amount	8. Price of Derivative			11. Nat
1. Title of	2.	3. Transaction	Table II -  3A. Deemed Execution Date,	- Derivative S (e.g., puts, c 4. if Transacti Code	Securiti calls, wa 5. N on of D Securiti Acq or D of (I	es Acqu rrants, umber derivativarities uired (A disposed D) tr. 3, 4,	Perso in this a curi ired, Dis options, o 6. Date Expirat (Month	s form a rently va posed of convertib Exercisa	are not requalid OMB of the securition of the securities of the se	ially Owned  7. Title and of Underlyin	Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nation of Indir Benefic Owners (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -  3A. Deemed Execution Date, any	- Derivative (e.g., puts, c (e.g., puts, c 4. if Transacti Code ar) (Instr. 8)	Securiti calls, wa 5. N on of D Securiti Acq or D of (I	es Acqu rrants, umber verivativ urities uired (A visposed D) tr. 3, 4, 5)	Perso in this a curi	posed of convertil Exercisa ion Date /Day/Ye	are not requalid OMB of the securities and securities are principles.	ially Owned  7. Title and of Underlyin Securities	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nation of Indir Benefic Owners (Instr. 4

#### **Reporting Owners**

D 4 0 V /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Jacques Rachelle Suzanne 500 RIVER RIDGE DRIVE NORWOOD, MA 02062	X					

#### **Signatures**

/s/ Rachelle Suzanne Jacques	04/08/2019
**Signature of Reporting Person	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).
- (1) The option award was made in accordance with the terms of the issuer's 2014 Equity Compensation Plan. The option will vest in equal monthly installments over the course of 12 months beginning on the date of grant.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$ 

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.