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

OMB APPR	OVAL
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Estimated average	burden
hours per response	e 0.5

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

1. Name a	pe Response														
1. Name and Address of Reporting Person * Cohen Yuval			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) 08/17/2015						X Officer (give title below) Other (specify below)  Chief Executive Officer						
(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)		Tab	ole I - Non-	Deri	vative S	ecurities	Acqui	red, Dispo	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	Security	D	Transaction date Month/Day/Year)	2A. Deemed Execution Date, any			str. 8) (Instr. 3, 4 and 5) Reported Trans		lly Owned I Transaction	Following	Ownership Form:	7. Nature of Indirect Beneficial			
				(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		o (1	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock	0	8/17/2015			P		1,025	ΙΔ	\$ 1.937	3,825			D	
Common	Stock	0	8/17/2015			P		1,075	A	\$ 1.9	4,900			D	
Reminder: indirectly.	Report on a	separate line for	each class of secu	nrities benefici	ally o		Pers cont	ons wh	n this fo	rm ar	e not req	uired to re	oformation espond un ntrol numb	less	EC 1474 (9- 02)
				Derivative Sec e.g., puts, call							lly Owned	I			
Security (Instr. 3)	Conversion or Exercise Price of Derivative		Execution Da (Year) any	4. Transaction Code Year) (Instr. 8)		of and		nd Expiration Date Month/Day/Year)		Ame Und Sect	nount of derlying		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivati Security Direct ( or Indire	Ownershi (Instr. 4)
(11011. 5)	Security														ect

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
Cohen Yuval C/O CORBUS PHARMACEUTICALS HOLDINGS, INC 100 RIVER RIDGE DRIVE NORWOOD, MA 02062	X		Chief Executive Officer		

# **Signatures**

/s/ Yuval Cohen	08/18/2015
**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).

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 nu	mber.