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

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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

| | d Address o | | rson * | 2. Issuer N | Name a | and Ticker | or Tra | ading Sy | mbol | 5 | 5. Relation | nship of Rep | oorting Perso | n(s) to Issue | r |
|---|-------------|--|--|--|---------------------------|-----------------|--|------------------|---|---|--|---|--|--|-------------------|
| 1. Name and Address of Reporting Person * Cohen Yuval | | | 2. Issuer Name and Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP] | | | | | 3P] | (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) 11/13/2015 | | | | | | 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) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution I any (Month/Day | Date, if | ce, if Code (Instr. 8) | | (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Following (s) | Ownership of Form: B Direct (D) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | Code | V Amount (A) or (D) | | Price | | | | | (Instr. 4) | |
| Common | Stock | | 11/13/2015 | | | P | | 850 | | \$ 1.73 | 6,300 | | | D | |
| indirectly. | | • | | Derivative So | | es Acquire | conta the fe | ained in orm dis | n this for splays a | rm are currei ieficial | not req | uired to re | nformation espond unl ntrol numb | ess | C 1474 (9- 02) |
| Security | Conversion | 3. Transaction Date (Month/Day/Y | 3A. Deemed Execution Da | 4. Transaction Code (Instr. 8) | | 5. Number of | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Ti Amo Unde Secu | tle and ount of erlying rities r. 3 and | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form of Derivative Security: Direct (D) or Indirect | | |
| | | | | Code | e V | (A) (D) | Date Exer | e rcisable | Expiration Date | n Title | Amount or Number of Shares | | | | |
| Repor | ting O | wners | | | | | | | | | | | | | |

| Percetice Occurs Name / Addition | 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 | 11/16/2015 |
|------------------------|------------|
| 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.