FORM 4	4
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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).					

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

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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 Ty	pe Response	es)		•						-					
1. Name and Address of Reporting Person + Hochman David P			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 Director 10% Owner						
(Last) (First) (Middle) C/O CORBUS PHARMACEUTICALS HOLDINGS, INC, 100 RIVER RIDGE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 11/18/2016							r (give title belo	w)	Other (specify	below)		
(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 Acqui						ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	f Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
				(Wohth Day) I car	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		11/18/2016		Р		10,000	А	\$ 6.996	456,100			D		
Common	Stock									4,300			I	By Solomon Asher Hochman Trust of 2005	
Common	Stock									4,300			I	By Hannah Hochman Trust of 2007	
Common	Stock									4,300			I	By Judah Herman Hochman Trust of 2009	
Common	Stock									200,000			Ι	By NSH 2008 Family Trust	
Reminder: indirectly.	Report on a	separate line f	for each class of sec	urities beneficially	owned dired	etly o	or								
						cont	ained in	this f	orm ar	e not req	ction of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)	
				Derivative Securiti e.g., puts, calls, wa	-		•	· ·		•	L				
1. Title of	2.	3. Transactio			5. Number	1					8. Price of	9. Number	of 10	11. Natur	
Derivative Security	Conversion		Year) Execution D	ate, if Transaction Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed	and	Expiratio	on Date	Am Uno Sec	Title and ount of derlying urities 8. Price of 9. Number Derivative Derivative Security (Instr. 5) Its: 1.000 (Instr. 5) Beneficial Owned Following Reported		y Owners Form of Derivat Security Direct (or Indir	hip of Indirec f Beneficia ive Ownershi y: (Instr. 4) D)		
					of (D) (Instr. 3, 4, and 5)							Transaction (Instr. 4)	n(s) (I) (Instr. 4)	

Reporting Owners

	Relationships				
Reporting Owner Name / Address					

Date

Code

V (A) (D)

Exercisable Date

Expiration

Amount or Title Number

of Shares

Hochman David P	Director	10% Owner	Officer	Other	
C/O CORBUS PHARMACEUTICALS HOLDINGS, INC	x				
100 RIVER RIDGE DRIVE	Λ				
NORWOOD, MA 02062					

Signatures

/s/ David Hochman	11/21/2016
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 number.