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 Type Responses) 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)			
Hoenman David P (Last) (First) (Middle) C/O CORBUS PHARMACEUTICALS HOLDINGS, INC, 100 RIVER RIDGE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 11/13/2017						XDirector Officer (give title below)	10% Owner 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 Acquired, Disposed of, or						ired, Disposed of, or Beneficially	Beneficially Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	ction	(A) or D (D)	ities Acquired : isposed of		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock									459,500	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		11/13/2017		А		5,000	А	\$ 6.9	215,000	I	By NSH 2008 Family Trust	
Reminder: Report or indirectly.	n a separate line	for each class of secu	rities beneficially o]I	Pers	ons who			• the collection of information		EC 1474 (9- 02)	

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. Nu	ımber	6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Deriv	vative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Secu	rities	ities		Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Acqu	iired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A) c	r			4)			Following	Direct (D)	
					Disp	osed						Reported	or Indirect	
					of (D	· · · ·						Transaction(s)	< / <	
					(Instr							(Instr. 4)	(Instr. 4)	
					4, an	d 5)								
										Amount				
							Data	Expiration		or				
							Date Exercisable		Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name / Address		Relationships				
	Director	10% Owner	Officer	Other		

Hochman David P			
C/O CORBUS PHARMACEUTICALS HOLDINGS, INC	Х		
100 RIVER RIDGE DRIVE			
NORWOOD, MA 02062			

Signatures

/s/ David Hochman	11/14/2017
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.