FORM 4

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

OMB APPROVAL									
DMB Number:	3235-0287								
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nours per response									

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

(Fillit of Ty	pe Response	es)																			
	. Name and Address of Reporting Person *- Moran Sean F.				2. Issuer Name and Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) C/O CORBUS PHARMACEUTICALS HOLDINGS, INC, 100 RIVER RIDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/21/2015																
	4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line)											
NORWOOD, MA 02062												_X_Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City) (State) (Zip)						Ta	ble I -	- Non-	-Deri	vative S	Securitio	quired, D	ispose	ed of, or l	Beneficially	y Owi	ned				
1.Title of S (Instr. 3)	Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date any (Month/Day/Y		Code (Inst			A. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) (A) or Disposed of (Instr. 3, 4 or 5)		of (I	D) Benef Repor (Instr.	. Amount of Securities teneficially Owned Following teported Transaction(s) Instr. 3 and 4)			Ownership of Form: Bo Direct (D)		. Nature f Indirect geneficial wnership (nstr. 4)		
Common	Stock		08/21/201	15]	P		1,400	A	\$ 2.05	40,25	50			D				
indirectly.		separate line f		ıble II - D	Perivative S	ecuriti	ies Ac	equire	Pers cont the f	sons what in the second	n this is splays of, or B	form a cu enefi	are not i irrently v icially Ow	requi alid C	red to re	formation espond un ntrol numb	iless		1474 (9- 02)		
Security	2. Conversion or Exercise Price of Derivative Security		Year) Exec	Deemed cution Date	e.g., puts, ca 4. te, if Trans Code Year) (Instr.	action	5. Number		6. D	ate Exer Expirati	,		ies) 7. Title and Amount of Underlying Securities (Instr. 3 an	D Se (I		9. Number Derivative Securities Beneficiali Owned Following Reported Transactio (Instr. 4)	Owne Form Deriv Secur Direct or Ind	Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)		
					Code	e V	(A)	(A) (D)		e rcisable	Expirat Date	ion 7	Amo or Fitle Num of Share	ber							
Repor	ting O	wners	•		-	•							·	•							
	Donor	ting Owner N	Jamo / Add	· ·						Relatio	nships										
Reporting Owner Name / Address					Direc	ctor	10% ()wne	r Offic	er			Othe	er							
Moran Sean F. C/O CORBUS PHARMACEUTICALS HOLDINGS, INC 100 RIVER RIDGE DRIVE NORWOOD, MA 02062									Chie	ef Fina	ncial	l Officer									

Explanation of Responses:

Signatures

/s/ Sean Moran

**Signature of Reporting

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

08/21/2015 Date

** 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.