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

OMB APPROVAL					
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Estimated average burden					
nours 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

Name and Address of Reporting Person * Cohen Yuval			2. Issuer Name and Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP]							RBP]	ıl	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O CORBUS PHARMACEUTICALS HOLDINGS, INC, 100 RIVER RIDGE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 11/10/2017							X_ Director					
(Street) NORWOOD, MA 02062				4. If A	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							Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Executi any		3. Transac Code (Instr. 8)	ction	A. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)			(D) Beneficially Owned Reported Transaction		ally Owned I Transaction	Following on(s)	Ownership Form:	7. Nature of Indirect Beneficial	
				(Month	/Day/Ye	ear)	Code	V	Amount	(A) or (D)	Pric	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		11/10/2017				P		1,000	A	\$ 7.16	85	58,775			D	
Reminder: Findirectly.	Report on a s	separate line	for each class of sec					Person the	sons wh tained i	n this f splays	form a cu	are rren	not req tly valid	uired to re d OMB cor	formation spond unl itrol numb	ess	EC 1474 (9- 02)
			Table II - I				es Acquiro rrants, op						y Owned				
Security (Instr. 3)	2. 3. Transacti Conversion Date or Exercise (Month/Day Price of Derivative Security		Execution D (Year) any			ion	of	and (M	6. Date Exercisable and Expiration Date (Month/Day/Year)		E A L S	7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	ve Ownership (Instr. 4) D)
					Code	V	(A) (D)	Dat Exe	te ercisable	Expirat Date	tion T	Γitle	Amount or Number of Shares				
Repor	ting O	wners															

Percetice Occurs Name / Addition	Relationships						
Reporting Owner Name / Address	Director	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	11/13/2017
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.