FORM 4	1
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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

1. Name and Address of Reporting Per Moran Sean F.	rson <del>*</del>	2. Issuer Name <b>and</b> Ticker or Trading Symbol Corbus Pharmaceuticals Holdings, Inc. [CRBP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_Officer (give title below) Chief Financial Officer				
(Last) (First) C/O CORBUS PHARMACEU HOLDINGS, INC, 500 RIVER DRIVE		3. Date of Earliest Transacti 05/14/2019			onth/Day/	Year)			Jincer		
(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 PersonForm filed by More than One Reporting Person				
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if		tion	(A) or Disposed of (D) Beneficially Owned Following (Instr. 3, 4 and 5) Reported Transaction(s) Ownership Form: Ber			Beneficial Ownership			
			Code	V	Amount	(A) or (D)	Price		(I) (Instr. 4)	(1150.4)	
Common Stock	05/14/2019		Р		100	А	\$ 7.12	349,610	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless.

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### SEC 1474 (9-

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

			(e.g., ]	outs, calls	, wa	arran	ts, opt	tions, conver	tible securi	ties)					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur				(Instr	. 3 and			~	(Instr. 4)
	Security					Acqu				4)			0	Direct (D)	
						(A) 0							1	or Indirect	
						Dispo							Transaction(s)	< / .	
						of (D	· · · · · · · · · · · · · · · · · · ·						(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable	*	Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
Moran Sean F. C/O CORBUS PHARMACEUTICALS HOLDINGS, INC 500 RIVER RIDGE DRIVE NORWOOD, MA 02062			Chief Financial Officer					

## Signatures

/s/ Sean Moran	05/14/2019
***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.