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

| OIVID APPROVAL | | | | | |
|-----------------------|----------|--|--|--|--|
| OMB Number: | 3235-028 | | | | |
| Estimated average bur | den | | | | |
| hours per response | 0. | | | | |

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

| (Print or Typ | e Responses |) | | | | | | | | | | | | | | | |
|---|---|--|--|---|-----------|-------------------------|-------|---------------------------------|---|--|---|--|--|--|----------------------------|---|--|
| Name and Address of Reporting Person * Longcor Jarrod | | | | 2. Issuer Name and Ticker or Trading Symbol Cellectar Biosciences, Inc. [CLRB] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
| (Last) (First) (Middle) C/O CELLECTAR BIOSCIENCES, INC., 100 CAMPUS DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/05/2020 | | | | | | X | | | | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_ Fo | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person | | | | | | |
| FLORHA (City | .M, NJ 079 | O32 (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | |
| | | (State) | | | | | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Date, if | Code (Instr. 8) (| | (A) c | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Owno Trans | 5. Amount of Securities Beneficial Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership Form: | 7. Nature of Indirect Beneficial Ownership | |
| | | | (Month/Day/ | | y/ i ear) | Со | de V | Amo | (A) or (D) | | ice | | ,) | | or Indirect (I) (Instr. 4) | | |
| Common | Stock | | 06/05/2020 | | | | F | , | 65,2 | 218 A | \$ 1.1 | 45 72,5 | 18 | | | D | |
| | | | Table II | | | | | quired, Di | ispose | y valid Ol d of, or Be ertible sec | neficia | ally Owne | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | (e.g., puts, calls, w 4. 5. Num f Transaction of Det Code Secur (i) (Instr. 8) Acqui or Dis of (D) | | | 5. Number 6. Date Exerc | | converse exercise on Date | ercisable and Date (Sy/Year) | | | | | 9. Number of Derivative Securities Beneficially Owned Following Reported | Owners Form of | Beneficia Ownershi (Instr. 4) | |
| | | | | | | | | | | | | | | Transaction(s) (Instr. 4) | | | |
| | | | | Code | V | (A) | (D) | Date Exercisa | ble | Expiration Date | Ti | itle | Amount or Number of Shares | | (mstr. 4) | (msu. 4 | |
| Series H Warrants | \$ 1.2075 | 06/05/2020 | | P | · | 32,609 | , , | | 2020 | 06/05/20 |)25 C | Common Stock | 32,609 | \$ 0.01 | 32,609 | D | |
| Repor | ting O | wners | | | | | | | | | | | | | | | |
| | | | | | I | Relation | ships | | | | | | | | | | |
| Reporting Owner Name / Address Director | | | | 10% Officer | | | | | Other | | | | | | | | |

| | Relationships | | | | | | |
|--|---------------|--------------|------------------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Longcor Jarrod C/O CELLECTAR BIOSCIENCES, INC. 100 CAMPUS DRIVE FLORHAM, NJ 07932 | | | Chief Business Officer | | | | |

Signatures

| /s/ Christina Blakley, attorney-in-fact for Jarrod Longcor | 06/08/2020 |
|--|------------|
| 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 no | ot required to respond unless the form displays a currently valid OMB number. |
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