FORM 4

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

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
nours per respon-	se 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

(Print or Ty	pe Response	es)															
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)				
(Last) (First) (Middle) C/O CELLECTAR BIOSCIENCES, INC., 3301 AGRICULTURE DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/13/2018						r)	Director 10% Owner X Officer (give title below) Other (specify below) Chief Business Officer						
(Street) MADISON, WI 53716				4. If Amendment, Date Original Filed(Month/Day/Year)						rear)	_X_ Form fil	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 Acqui							osed of, or	Beneficially	Owned			
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			ıy/Year)	1 2A. Deemed Execution Date, if any		Code (Instr. 8		4. Securities (A) or Dispos (Instr. 3, 4 an		ed of (D	Reported Transaction(s)		Following	6. Ownership Form:	Beneficial		
					(Mon	th/Day/Year)	Code	V	Amount	(A) or (D) Price		Ì	tr. 3 and 4) E o (1			Ownership (Instr. 4)	
Common	Stock		03/13/20	18			S ⁽¹⁾		13,000	D	\$ 1.184 (2)	4 67,000			D		
Reminder: indirectly.	Reminder: Report on a separate line for each class of securities beneficially owned directly or																
contained in this form are not required to respond unless 02) the form displays a currently valid OMB control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
			112			uts, calls, wa											
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transactic Date (Month/Day	(Year) Executany			4. Transaction Code (Instr. 8)		and (Mes d	r 6. Date Exercis and Expiration (Month/Day/Yo		te A U Se	Title and mount of nderlying ecurities nstr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners: Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4) D) ect	
						Code V	(A) (I			Expira Date	ation Ti	Amount or itle Number of Shares					
Reporting Owners																	
Reporting Owner Name / Address					Relationships												
Direct			tor 10% Owner Officer					Other									
Longcor Jarrod C/O CELLECTAR BIOSCIENCES, INC. 3301 AGRICULTURE DRIVE MADISON, WI 53716					Chief Business Office			er									
Signatures																	
/s/ Christ	tina Blakle	y, attorney-	in-fact for	Jarrod	Long	gcor	03/1	4/201	.8								
/s/ Christina Blakley, attorney-in-fact for Jarrod Longcor 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).
- (1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 29, 2017 to satisfy tax withholding obligations upon vesting of restricted stock.

The price reported in Column 4 of Line 1 with respect to the 13,000 shares sold on March 13, 2018 is a weighted average price. These shares were sold in multiple (2) transactions at prices ranging from \$1.17 to \$1.21. The Reporting Person has provided to the Issuer, and undertakes to provide to any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in Footnote (2) to this Form 4.

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.