FORM 4

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

OMB APPROVAL					
MB Number:	3235-0287				
stimated average	burden				
ours per response	e 0.5				

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

(Print or Ty	pe Response	es)												
1. Name and Address of Reporting Person * Swirsky Douglas J (Last) (First) (Middle) C/O CELLECTAR BIOSCIENCES, INC., 3301 AGRICULTURE DRIVE			Issuer Name and Ticker or Trading Symbol Cellectar Biosciences, Inc. [CLRB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
			DIG COOL	3. Date of Earliest Transaction (Month/Day/Year) 05/31/2017						Officer (give title below)Other (specify below)				
(Street)				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				
MADISC	ON, WI 537	716								Form filed by	More than One	Reporting Person		
(Cit	y)	(State)	(Zip)		Т	able I -	Non-Deriva	tive Securitie	s Acquire	d, Disposed	l of, or Ben	eficially Owr	ed	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ned n Date, if	Code (Instr. 8	4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5)		of (D) Owned Follo		f Securities Beneficially owing Reported (s)		Ownership o	. Nature f Indirect eneficial
				(Month/D	Oay/Year)	Code	e V Ar	(A) or	(In	or (I		Ownership r Indirect (Instr. 4) (Instr. 4)		
Reminder:								ed in this fo	rm are no	ot required	to respo	nd unless th		74 (9-02)
Reminder:							containe form dis		rm are no rently val	ot required lid OMB co	to respo	nd unless th		74 (3-02)
1. Title of	Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, if	4. Transact	5. Notion of Derivor Secure (A) of Disp (D)	wative rities nired or osed of r. 3, 4,	containe form dis ired, Dispos options, con	ed in this for splays a currence of, or Ben avertible securitisable and Date	rm are no rently val	ot required lid OMB co Owned and of ing	to respondent of number of the second number of the	nd unless th	T 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact	tion of Derivors Secure (A) of Disp (D) (Insti	varive rities aired or osed of r. 3, 4, 5)	containd form dis ired, Dispos options, con 6. Date Exe Expiration 1	ed in this for splays a current of the second of the secon	rm are no rently val reficially O rities) 7. Title a Amount o Underlying Securities	ot required lid OMB co Owned and of ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	To. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

Daniel Adding	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Swirsky Douglas J C/O CELLECTAR BIOSCIENCES, INC. 3301 AGRICULTURE DRIVE MADISON, WI 53716	X					

Signatures

/s/ Chad Kolean, attorney-in-fact for Doug Swirsky	06/01/2017
**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) Options vest in equal annual increments over a period of three years from the date of grant.

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.