## FORM 4

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

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average	e burden							
nours per respons	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

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				2201	3. Date of Earliest Transaction (Month/Day/Year) 08/16/2018							Director 10% Owner  X Officer (give title below) Other (specify below)  Chief Business Officer					
(Street) MADISON, WI 53716				4	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)	1	Table I - Non-Derivative Securities Acqu							ired, Disp	osed of, or	Beneficially	Owned		
(Instr. 3) Date		2. Transact Date (Month/Da	y/Year) E	A. Deemed Execution Date, ny Month/Day/Yea	if Code (Instr. 8)			(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	lly Owned Following Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	Stock		08/16/201	18		Cod	le		Amount 500		Price \$ 2.71	7,200			(Instr. 4)		
Reminder: indirectly.	Report on a	separate line f	or each class	s of securi	ties beneficially	owned d		•				the colle	ection of :	nformation	a	EC 1474 (9-	
			T.1	L.H. D.		4	cc th	onta ie fo	ined in orm dis	this fo	orm ai	e not req	uired to re	espond unl	ess	02)	
				(e.g	rivative Securi 3., puts, calls, w	arrants,	optio	ons,	convert	ible secu		•	1				
1. Title of Derivative Conversion or Exercise (Instr. 3) Price of Derivative Security		3. Transactio Date (Month/Day/	Year) Exect		4. Transaction Code (Instr. 8)	of Derivat Securit Acquire (A) or	f and and and according to the courities and according to the courities are consistent and according to the couring to the cou		ate Exercisable Expiration Date onth/Day/Year)		Am Und Sec	ount of derlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners: Form of Derivati Security Direct (I or Indire	Ownersh (Instr. 4)	
					Code V	(A) (		Date Exerc		Expiration Date	on Titl	Amount or e Number of Shares					
Repor	ting O	wners															
Ren	orting Own	er Name / Ad	dress		R	Relations	hips										
Reporting Owner Name / Address  Direct Longcor Jarrod C/O CELLECTAR BIOSCIENCES, INC. 3301 AGRICULTURE DRIVE MADISON, WI 53716			Director				Oth siness Officer			er							
Signat	tures																

## **Explanation of Responses:**

/s/ Christina Blakley, attorney-in-fact for Jarrod Longcor

Signature of Reporting Person

- \* 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.

08/17/2018

