# FORM 4

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

OMB APPR	OVAL
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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).

#### 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

	pe Response	es)																
1. Name and Address of Reporting Person * AWM Investment Company, Inc.					2. Issuer Name and Ticker or Trading Symbol Cellectar Biosciences, Inc. [CLRB]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  X 10% Owner						
527 MADISON AVENUE, SUITE 2600					3. Date of Earliest Transaction (Month/Day/Year) 12/01/2015							Officer (give title below) Other (specify below)						
(Street) NEW YORK, NY 10022				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							_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						uired, Disp							
1. Title of Security 2. Transaction Date (Month/Day/		Day/Year)	Executi any			(Instr. 8)					D) Beneficially Owned Fol Reported Transaction(s)		llowing	Form:	ship Indire Bene	eficial		
					Month	n/Day/Year		ode	V	Amount	(A) or (D)	Price	` ' '			rect (Instr	Ownership (Instr. 4)	
Common	Stock		12/01/2	015				S		42,110 (2) (3)	D	\$ 1.0405 (1)	5 753,512 <sup>(2)</sup> <sup>(3)</sup>			I (2) (	(2) (3) By Lim Partners (2) (3)	
Reminder: indirectly.	Report on a	separate line	e for each	class of sec	urities	beneficiall	y own	ed dir	ectly	or							•	
									СО	ntained i	n thi	s form	to the colle are not req rently valid	uired to re	spond	unless		1474 (9- 02)
						tive Secur							cially Owned	l				
1. Title of	2. Conversion or Exercise Price of Derivative Security		E	A. Deemed Execution D		4. Transactio	n of		an	Date Exer d Expirati Ionth/Day	on D	ate A	Title and mount of inderlying	8. Price of Derivative Security		ve	10. Ownership	11. Natur
Security (Instr. 3)	Price of Derivative			ny Month∕Day,	/Year)		Sec (A) Dis of (	curities quired or sposed	\$   `		, i ca	S	ecurities nstr. 3 and	(Instr. 5)	Benefici Owned Followin Reported Transact (Instr. 4)	ally ng d tion(s)	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	of Indirec Beneficia Ownershi (Instr. 4)

#### **Reporting Owners**

Boundary Community (Addition	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
AWM Investment Company, Inc. 527 MADISON AVENUE SUITE 2600 NEW YORK, NY 10022		X					

### **Signatures**

Adam C. Stettner	12/03/2015
**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) This is a weighted average price.

AWM Investment Company, Inc., a Delaware corporation (AWM), is the investment adviser to Special Situations Fund III QP, L.P. (SSFQP), Special Situations Cayman Fund, L.P. (CAYMAN) and Special Situations Life Sciences Fund, L.P. (SSLS and together with SSFQP and CAYMAN, the Funds). As the investment adviser to the

Funds, AWM holds sole voting and investment power over 355,836 shares of Common Stock of the Issuer (the Shares) held by SSFQP, 118,541 Shares held by CAYMAN and 279,135 Shares held by SSLS.

Austin W. Marxe (Marxe), David M. Greenhouse (Greenhouse) and Adam C. Stettner (Stettner) are the controlling principals of AWM. The reporting person disclaims (3) beneficial ownership of the Shares, except to the extent of its pecuniary interest therein. This report shall not be deemed an admission that the reporting person is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

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.