## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*     Hamill Laura				<u>Y</u> -	2. Issuer Name and Ticker or Trading Symbol Y-mAbs Therapeutics, Inc. [YMAB]							(Che	elationship o eck all applications Officer ( below)	able)	Perso	10% Ov Other (s	mer		
(Last) (First) (Middle) C/O Y-MABS THERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/23/2020								below)			below)		
230 PARK AVENUE SUITE 3350					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW YORK NY 10169													X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(S		(Zip)																
		Tal	ole I - Nor	ı-Deriv	/ativ	e Se	curitie	s Ac	quired, D	Disp	osed of	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F Reported	es For ally (D) following (I) (		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			(111501.4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, 1	1. Fransa Code (1 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		Expiration Date	Title	Amount or Number of Shares						
Non- Employee Stock Option (right to buy) <sup>(1)</sup>	\$48.67	06/23/2020			A		32,000		07/23/2020 <sup>(2</sup>	2) (	06/23/2030	Common stock	32,000	\$0	32,000	)	D		

## Explanation of Responses:

- 1. Stock options granted to the Reporting Person as a non-employee director pursuant to the 2018 Equity Incentive Plan of Y-mAbs Therapeutics, Inc.
- 2. The stock options vest in equal monthly installments until the third anniversary of the date of grant, subject to the Reporting Person's continued service on the board of directors of Y-mAbs Therapeutics, Inc., and are exercisable immediately upon vesting.

/s/ Laura Hamill

06/24/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.