SEC For	m 4															
FORM 4 UNITED STAT								ES AND		NGE C	OMMI	SSION		OMB APF	ROV	/AL
Section 16. Form 4 or Form 5 obligations may continue. See					NT OF CHANGES IN BENEFICIAL OWNERSHIP								OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person <sup>*</sup> Kruse Bo					2. Issuer Name and Ticker or Trading Symbol Y-mAbs Therapeutics, Inc. [YMAB]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify			ner	
(Last) (First) (Middle) C/O Y-MABS THERAPEUTICS, INC. 230 PARK AVENUE SUITE 3350					3. Date of Earliest Transaction (Month/Day/Year) 12/15/2020							X below) below) EVP, CFO, Secy & Treas.				
(Street) NEW YORK NY 10169				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)													
Table I - Non-Deriva       1. Title of Security (Instr. 3)       2. Transa       Date (Month/D)					ction 2A. Deemed Execution I			, 3. Transacti Code (Ins			ed (A) or	5. Amou Securitie Beneficia	nt of s ally following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	t o ct E	7. Nature of Indirect Beneficial Ownership (instr. 4)
								Code V	Amount	(A) o (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)
		-	Table II - Dei (e.ç					uired, Dis s, options,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 a	g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Direc (I) (In:	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	ıber				
Employee Stock Option (right to buw) <sup>(1)</sup>	\$53.88	12/15/2020		A		72,350		(2)	12/15/2030	Common stock	72,350	\$0	72,350	) I	)	

## Explanation of Responses:

1. Stock options granted to the Reporting Person pursuant to the 2018 Equity Incentive Plan of Y-mAbs Therapeutics, Inc.

2. The stock option shall vest and become exercisable as to 25% of the shares subject to the option on December 15, 2021, and thereafter vests and become exercisable as to 1/48th of the shares in equal monthly installments, until such time as the option is 100% vested, subject to the continuing employment of the Reporting Person on each vesting date.

## <u>/s/ Bo Kruse</u>

\*\* Signature of Reporting Person Date

<u>12/16/2020</u>

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

\* 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.