FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 3235-OMB Number: 0104 INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF Estimated average burden **SECURITIES** hours per response: 0.5

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* Rajah Vignesh			2. Date of E Requiring S (Month/Day 06/02/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol Y-mAbs Therapeutics, Inc. [YMAB]						
(Last) HENRIKSH	(Last) (First) (Middle) HENRIKSHOJ 8, ROOM 4		30/02/202	33.32.2020		4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give		wner 6	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) VEDBAEK (City)	G7 (State)	2950 (Zip)		X	title below) SVP and C	below)		X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					unt of Securities ially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
[E			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)			4. Conversio or Exercis	Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
			Date Exercisable	Expiratior Date	Amount or Number of Shares		Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

No securities are beneficially owned.

/s/ Vignesh Rajah

06/12/2020

OMB APPROVAL

** Signature of Reporting

Date

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 5 (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.