## FORM 4

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

OMB APPROV	/AL
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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

1 Nama ar														
1. Name and Address of Reporting Person* GREENWOOD DAVID				2. Issuer Name and Ticker or Trading Symbol CohBar, Inc. [CWBR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director 10% Owner					
(Last) (First) (Middle) 1455 ADAMS DRIVE, SUITE 2050, MENLO BUSINESS PARK (Street) MENLO PARK, CA 94025				Date of Earliest Transaction (Month/Day/Year)     04/19/2019  4. If Amendment, Date Original Filed(Month/Day/Year)					Officer (give title below)  Other (specify below)  6. Individual or Joint/Group Filing(Check Applicable Line)  X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person					
								_X_						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu				es Acquirec	dired, Disposed of, or Beneficially Owned						
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	r) any	eemed tion Date, h/Day/Ye	(Instr	: ((:.8)	A. Securities Acq A) or Disposed of Instr. 3, 4 and 5)	of (D) Ow Tra	Amount of Somed Followinsaction(s) str. 3 and 4)		C   F   C   O   (.)	Ownership orm: B Oirect (D) O r Indirect (I	Nature EIndirect eneficial wnership nstr. 4)
Reminder		oppurate mile for cac	. January or securities t	, viiviiviai	, owned	votiy								
Reminder:			Table II				Person in this a curre	s who respon form are not r ntly valid OMI osed of, or Bene nvertible secur	equired to B control r eficially Ow	respond ι number.				74 (9-02)
1. Title of	·		3A. Deemed Execution Date, if	4. Transact	5. Nu Deriv Secur Acqu	mber of ative ities ired (A) sposed of	Person in this a curre quired, Disp s, options, co 6. Date Exc Expiration (Month/Da	form are not rently valid OMI  osed of, or Beneratible secure ercisable and Date	equired to B control r eficially Ow	respond unumber.  ned d Amount ing	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	stion Deriv Secu Acquor Di (D) (Insti	warrant mber of ative ities ired (A) sposed of	Person in this a curre quired, Disp, s, options, co 6. Date Exe Expiration (Month/Da) f  Date Exercisable	form are not r ntly valid OMI osed of, or Bene nvertible secur ercisable and Date y/Year)	equired to B control reficially Owities)  7. Title and of Underly Securities	respond unumber.  ned d Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indire Benefici Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
GREENWOOD DAVID 1455 ADAMS DRIVE, SUITE 2050 MENLO BUSINESS PARK MENLO PARK, CA 94025	X				

### **Signatures**

/s/ Jeffrey F. Biunno, Attorney-in-fact for David Greenwood	04/23/2019
**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) Shares subject to the option shall vest in 48 successive monthly installments beginning on April 19, 2019.

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 no	ot required to respond unless the form displays a currently valid OMB number.