FORM 4

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

OMB APPROVAL				
OMB Number:	3235-028			
Estimated average	burden			

0.5

hours per response...

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 NI-														
Print or Type Responses) 1. Name and Address of Reporting Person * Cohen Pinchas			2. Issuer Name and Ticker or Trading Symbol CohBar, Inc. [CWBR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director						
(Last) (First) (Middle) C/O COHBAR, INC., 1455 ADAMS DRIVE, SUITE 2050			3. Date of Earliest Transaction (Month/Day/Year) 04/26/2021						Officer (give	title below)	Other	(specify below)		
(Street) MENLO PARK, CA 94025			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					es Acquirec	iired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	Execu any	eemed tion Date, in h/Day/Year	Code (Instr	. 8)	Amount (D)	Own Tra	Amount of Somed Followinsaction(s) str. 3 and 4)		C F C O	ownership of orm: Be over (D) over Indirect (Ir	Nature Indirect eneficial wnership nstr. 4)
Reminder:	report on a	· · · · · · · · · · · · · · · · · · ·			J	-	-							
Reminder:	Tepon on a c			- Deriva	itive Securi	ies Acc	Person in this ta curre	s who respon form are not r ntly valid OM	equired to B control r eficially Ow	respond ι number.				74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., p 4. Transac Code	tive Securi uts, calls, w 5. Nun Deriva Securi	ber of ive ies ed (A) osed of	Person in this a curre a curre puired, Dispos, options, co 6. Date Exe Expiration (Month/Da	form are not rently valid OM osed of, or Benomination or benomination of the security of the	equired to B control r eficially Ow	respond unumber. red d Amount	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. Natu of Indire Benefici
Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., p 4. Transac Code	tive Securi uts, calls, w 5. Nun Deriva Securi Acquin or Disj (D) (Instr.	ber of ive ies ed (A) osed of	Person in this to a curre a curre to the state Expiration (Month/Date Exercisable Exercisable	form are not r ntly valid OMi osed of, or Bend posed of, or Bend posed of, or Bend recisable and Date y/Year)	equired to B control reficially Ownities) 7. Title and of Underly Securities	respond unumber. red d Amount	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. Natu of Indire Benefici Ownersh

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Cohen Pinchas C/O COHBAR, INC. 1455 ADAMS DRIVE, SUITE 2050 MENLO PARK, CA 94025	X				

Signatures

/s/ Jeffrey F. Biunno, Attorney-in-fact for Pinchas Cohen	04/28/2021
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 over 48 successive equal installments (rounded down to the nearest whole share, except for the last vesting installment) beginning April 26, 2021.

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.