FORM D

Notice of Exempt Offering of Securities

Yet to Be Formed

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

OMB APPROVAL	
OMB Number: 3235-0076	
Expires: June 30, 2012	
Estimated Average burden hour per response: 4.0	s

I. Issuer's identity			
CIK (Filer ID Number)	Previous Name(s)	Mone None	Entity Type
0001582554			Corporation
Name of Issuer	-		Limited Partnership
Matinas BioPharma Holdings, Inc.			Limited Liability Company
Jurisdiction of Incorporation/Organization			General Partnership
DELAWARE]		Business Trust
Year of Incorporation/Organizatio	n en		Other
Over Five Years Ago			
 ✓ Within Last Five Years (Specify Year) 	013		

2. Principal Place of Business and Contact Information

Name of Issuer			
Matinas BioPharma Holding	s, Inc.		
Street Address 1		Street Address 2	
915 Klosterman Road East			
City	State/Province/Country	ZIP/Postal Code	Phone No. of Issuer
Tarpon Springs	FLORIDA	34689	908-443-1860

3. Related Persons

Last Name		First Name		Middle Name
Rongen		Roelof		
Street Address 1			Street Address 2	
915 Klosterman Road	East			
City		State/Province/	Country	ZIP/Postal Code
Tarpon Springs		FLORIDA		34689
Relationship:	Execut	ive Officer	Director	Promoter
Clarification of Response	(if Necessary	7)		
President and Chief Executive Officer				
Last Name First Name		First Name		Middle Name
Bobotas		George		
Street Address 1			Street Address 2	
915 Klosterman Road	East			

City	State/Provinc	ce/Country	ZIP/Postal Code	
Tarpon Springs	FLORIDA		34689	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Respo	nse (if Necessary)			
Executive Vice Presid	ent and Chief Scientific Offic	er		
Last Name	First Name		Middle Name	
Fawzy	Abdel	Cturt Address	A	
Street Address 1 915 Klosterman Ro	ad Fast	Street Address	2	
City	State/Provinc		ZIP/Postal Code	
Tarpon Springs	FLORIDA		34689	
- arp or optings				
Relationship:	Executive Officer	Director	Promoter	
Clarification of Respo	nse (if Necessary)	I	I	
-	ent, Pharmaceutical Developm	nent and Supply Chai	in	
L				
Last Name	First Name		Middle Name	
Gaglione	Gary			
Street Address 1		Street Address	2	
915 Klosterman Ro	ad East			
City	State/Provinc	ce/Country	ZIP/Postal Code	
Tarpon Springs	FLORIDA		34689	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Respon				
Interim Chief Financ	ial Officer on a consulting ba	sis		
Last Name	First Name		Middle Name	
Conrad	Herbert			
Street Address 1		Street Address	2	
915 Klosterman Ro	ad East			
City	State/Provinc	ce/Country	ZIP/Postal Code	
Tarpon Springs	FLORIDA		34689	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Respon	nse (if Necessary)			
Chairman of the Boa				
,				
Last Name	First Name		Middle Name	
Last Name Ferrari	First Name Stefano		Middle Name	

	l East		
City	State/Provin	ce/Country	ZIP/Postal Code
Tarpon Springs	FLORIDA		34689
		Diversity	
Relationship:	Executive Officer	Director	Promoter
Clarification of Respons	e (if Necessary)		
Last Name	First Name		Middle Name
Jabbour	Jerome		
Street Address 1		Street Addres	ss 2
915 Klosterman Road	l East		
City	State/Provin	ce/Country	ZIP/Postal Code
Tarpon Springs	FLORIDA		34689
Relationship:	Executive Officer	Director	Promoter
Relationship: Clarification of Respons	e (if Necessary)	Director	R
Clarification of Respons	e (if Necessary) First Name	Director	Middle Name
Clarification of Respons Last Name Stern	e (if Necessary)		Middle Name
Clarification of Respons Last Name Stern Street Address 1	e (if Necessary) First Name	Street Addree	Middle Name
Clarification of Respons Last Name Stern Street Address 1 915 Klosterman Road	e (if Necessary) First Name Adam I East	Street Addree	Middle Name
Clarification of Respons Last Name Stern Street Address 1	e (if Necessary) First Name	Street Addree	Middle Name
Clarification of Respons Last Name Stern Street Address 1 915 Klosterman Road	e (if Necessary) First Name Adam I East	Street Addree	Middle Name
Clarification of Respons Last Name Stern Street Address 1 915 Klosterman Road	e (if Necessary) First Name Adam I East State/Provin	Street Addree	Middle Name ss 2 ZIP/Postal Code
Clarification of Respons Last Name Stern Street Address 1 915 Klosterman Road	e (if Necessary) First Name Adam I East State/Provin	Street Addree	Middle Name ss 2 ZIP/Postal Code 34689

4. Industry Group

🔲 Agriculture

Banking & Financial Services

- Commercial Banking
- Insurance
- Investing
- Investment Banking
- Pooled Investment Fund

Other Banking & Financial Services

Business Services

Energy

- Coal Mining
- Electric Utilities
- Energy Conservation
- Environmental Services
- 🔲 Oil & Gas
- Other Energy

Health Care

- Health Insurance
- Hospitals & Physicians
- Pharmaceuticals
- **Other Health Care**

Manufacturing

Real Estate

- Commercial
- Construction
- REITS & Finance
- Residential
- Other Real Estate

Retailing

Restaurants

Technology

- Computers
- □ Telecommunications
- Other Technology

Travel

Airlines & Airports

- Lodging & Conventions
- Tourism & Travel Services
- Other Travel

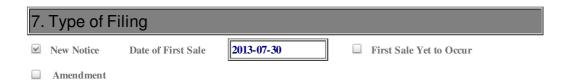
Other

5. Issuer Size

Reven	ue Range	Aggregate Net Asset Value Range		
	No Revenues		No Aggregate Net Asset Value	
	\$1 - \$1,000,000		\$1 - \$5,000,000	
	\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000	
	\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000	
	\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000	
	Over \$100,000,000		Over \$100,000,000	
\checkmark	Decline to Disclose		Decline to Disclose	
	Not Applicable		Not Applicable	

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505
Rule 504 (b)(1)(i)	Rule 506
Rule 504 (b)(1)(ii)	Securities Act Section 4(6)
Rule 504 (b)(1)(iii)	□ Investment Company Act Section 3(c)



8. Duration of Offering

Does the Issuer intend this offering to last more than one year?

🗌 Yes 🗹 No

9.	9. Type(s) of Securities Offered (select all that apply)			
	Pooled Investment Fund Interests	V	Equity	
	Tenant-in-Common Securities		Debt	
	Mineral Property Securities	¥	Option, Warrant or Other Right to Acquire Another Security	
	Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security		Other (describe)	

10. Business Combination Transaction

Is this offering being made in connection with a business combination ransaction, such as a merger, acquisition or exchange offer?

Clarification of Response (if Necessary)

Upon this closing, Matinas Merger Sub our wholly owned subsidiary merged with and into Matinas BioPharma, Inc. and became our wholly owned subsidiary. The stockholders of Matinas BioPharma will receive 9,000,000 shares of our Stock and Warrants

11. Minimum Investment		
Minimum investment accepted from any outside investor	\$ 0	USD

12. Sales Compensation	
Recipient	Recipient CRD Number 🔲 None
Aegis Capital Corp.	15007
(Associated) Broker or Dealer 👿 None	(Associated) Broker or Dealer CRD Number None
Street Address 1	Street Address 2
810 7th Ave	18th Floor
City	State/Province/Country ZIP/Postal Code
New York	NEW YORK 10019
State(s) of Solicitation All States	Foreign/Non-US

Recipient	Recipient CRD Number 🔲 None
NYPPEX, LLC	47654
(Associated) Broker or Dealer 🖉 None	(Associated) Broker or Dealer CRD ✓ None
Street Address 1	Street Address 2
800 Westchester Avenue	
City	State/Province/Country ZIP/Postal Code
Rye Brook	NEW YORK 10573
State(s) of Solicitation 🔲 All States	□ Foreign/Non-US

NEW YORK

Recipient	Recipient CRD Number	None
Kingsbury Capital LLC	147102	
(Associated) Broker or Dealer 🔍 None	(Associated) Broker or Dealer CR Number	D 👿 None
Street Address 1	Street Address 2	
One Rotary Center	1560 Sherman Ave, Suite 803	
City Sta	te/Province/Country	ZIP/Postal Code
Evanston	LINOIS	60201
State(s) of Solicitation All States Fo	oreign/Non-US	
ILLINOIS NEW YORK		

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IF.

Total Offering Amount	\$ 1500000	USD	Indefinite
Total Amount Sold	\$ 7593750	USD	
Total Remaining to be Sold	\$ 7406250	USD	🔲 Indefinite

Clarification of Response (if Necessary)

Contemporaneously with this closing, Issuer completed a private placement with existing stockholders of 500,000 warrants to purchase common stock.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors,

Number of such non-accredited investors who already have invested in the offering

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

52

Sales Commissions	\$	990895	USD	Estimate	
Finders' Fees	\$	0	USD	Estimate	
Clarification of Response (if Necessary)					

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

	\$ 0	USD	✓ Estimate
Clarification of Response (if Necessary)			
Some proceeds to be used for general working capital purposes which may include salaries and payments to officers and directors listed in Item 3.			

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and

agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

• Certifying that the Issuer is not disqualified from relying on any Regulation D exemption it has identified in Item 6 above for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Matinas BioPharma Holdings, Inc.	/s/ Roelof Rongen	Roelof Rongen	President and CEO	2013-08-06