longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

**OMB APPROVAL** OMB Number: 3235-0287 Estimated average burden 0.5 hours per response...

## 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

(Print or Type Responses)  1. Name and Address of Reporting Person*  CONRAD HERBERT J				2. Issuer Name and Ticker or Trading Symbol Matinas BioPharma Holdings, Inc. [MTNB]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director 10% Owner				
C/O MA	(Last) (First) (Middle) C/O MATINAS BIOPHARMA HOLDINGS, NC., 1545 ROUTE 206 SOUTH SUITE 302				3. Date of Earliest Transaction (Month/Day/Year) 11/01/2019						Officer (give	title below)	Other	specify below)	
(Street) BEDMINSTER, NJ 07921				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				
(Cir	ty)	(State)	(Zip)			Ta	ıble I	- Non-Deri	vative Securiti	es Acquire	d, Disposed	of, or Benef	icially Owned		
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	Execu any		ate, if C		8) (1	A) or Disposed onstr. 3, 4 and 5 (A) or mount (D)	of (D) Ov Tra	Amount of So wned Followin ansaction(s) astr. 3 and 4)		O Fo D or (I	wnership orm: Be irect (D) Ov Indirect (Ir	neficial vnership
			Table II					in this f a curre	s who respon orm are not r ntly valid OM	equired to B control eficially Ov	respond u number.				74 (9-02)
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	4. Transact	tion 5. Solution A on (I	alls, warr . Number	(A)	in this f a current aired, Dispo options, co	orm are not rently valid OM sed of, or Beno rertible secur reisable and Date	equired to B control eficially Ov ities)	o respond unumber.  vned  ad Amount ying	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	tion 5. Solution A on (I	Number Derivative Securities Acquired (or Dispose D) Instr. 3, 4	(A) ed of	in this f a current nired, Dispo options, co 6. Date Exe Expiration 1	orm are not rently valid OMi sed of, or Bend nvertible secur recisable and Date t/Year)  Expiration	equired to B control eficially Ovities)  7. Title an of Underly Securities	o respond unumber.  vned  ad Amount ying	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 Indired Beneficia Ownersh

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CONRAD HERBERT J C/O MATINAS BIOPHARMA HOLDINGS, INC. 1545 ROUTE 206 SOUTH SUITE 302 BEDMINSTER, NJ 07921	X					

# **Signatures**

/s/ Keith A. Kucinski, attorney-in fact for Herbert J. Conrad	11/05/2019
-*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).
- The option award was made in accordance with the terms of the Issuer's Amended and Restated 2013 Equity Incentive Plan (the "2013 Plan"). The option vests in equal monthly installments (1) over a period of 12 months commencing on December 1, 2019. The exercise price is based on the closing price for the shares of the Common Stock on the date of grant in accordance with the terms of the 2013 Plan.

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 not required to respond unless the form displays a currently valid OMB number.