SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

HIP OMB Number: Estimated average burden hours per response:

OMB APPROVAL

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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. Name and Address of Reporting Person [*] Scibetta James S | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Matinas BioPharma Holdings, Inc.</u> [MTNB] | | | | | | | | ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner | | | | vner |
|--|---|--|--|--------------|--|--|-----|--|----|------------------|--|----------------------------------|---|--|--------|--|--|
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/14/2022 | | | | | | | | Officer (g below) | ive title | | Other (s below) | specify |
| C/O MATINAS BIOPHARMA HOLDINGS, INC. 1545 ROUTE 206 SOUTH SUITE 302 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (Street) BEDMINSTER NJ (City) (State) | | |)7921 Zip) | | | | | | | | | | Form file | d by More | than C | One Reportin | ig Person |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month | | | | | action Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. | | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5 | | 5. Amount Securities Beneficiall Following Transactio | y Owned Reported | Form | vnership :: Direct (D) direct (I) :. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 an | | | | (1150.4) |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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 any (Month/Day/Yea | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and A Securities Ur Derivative Se 3 and 4) | derlying | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cod | e V | (A) | (D) | Date Exercisabl | | cpiration ate | Title | Amount or Number of Shares | | (Instr. 4) | | | |
| Stock option (right to buy) | \$0.7268 | 11/14/2022 | | A | | 142,657 | | (1) | 11 | /14/2032 | Common Stock | 142,657 | \$0 | 142,65 | 57 | D | |

Explanation of Responses:

1. 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 over a period of 12 months commencing on November 14, 2022. 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.

/s/ Keith A. Kucinski, attorney-in fact for James Scibetta <u>11/16/2022</u>

** Signature of Reporting Person 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 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).

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.