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

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. Name and Address of Reporting Person* Kucinski Keith A				2. Issuer Name and Ticker or Trading Symbol Matinas BioPharma Holdings, Inc. [MTNB]					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O MATINAS BIOPHARMA HOLDINGS, INC., 1545 ROUTE 206 SOUTH SUITE 302				3. Date of Earliest Transaction (Month/Day/Year) 06/17/2020					_>	X_Officer (give title below) Other (specify below) Chief Financial Officer				
(Street) BEDMINSTER,, NJ 07921			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group FilingCheck Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(Cit	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					es Acquire	nired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year) any	eemed tion Date, if h/Day/Year)		(.	A) or Disposed (Instr. 3, 4 and 5)	Own Tra	Amount of Serned Followin snsaction(s) str. 3 and 4)		O F	wnership orm: B irect (D) O Indirect (I	Nature f Indirect eneficial wnership nstr. 4)
			Table II	- Deriva	tive Securit	ies Acq	in this t	s who respon form are not r ntly valid OMI osed of, or Bene	equired to B control i	respond unumber.				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	5. Num Derivat Securiti	ber of ive es ed (A) osed of	in this is a curre uired, Dispo, options, co	form are not r ntly valid OMI osed of, or Bendonvertible secur ercisable and Date	equired to B control i eficially Ow	respond unumber. red d Amount	8. Price of		10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indire Beneficity Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	5. Num Derivat Securiti Acquire or Disp (D) (Instr. 3	ber of ive es ed (A) osed of	in this is a curre uired, Dispo, options, co	form are not r ntly valid OMI osed of, or Bend onvertible secur ercisable and Date y/Year)	equired to B control in eficially Own ities) 7. Title and of Underly Securities	respond unumber. red d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Securities Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersh (Instr. 4)

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Kucinski Keith A C/O MATINAS BIOPHARMA HOLDINGS, INC. 1545 ROUTE 206 SOUTH SUITE 302 BEDMINSTER,, NJ 07921			Chief Financial Officer		

Signatures

/s/ Keith A. Kucinski	06/19/2020
**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. Vesting is performance based and tied to achievement of (1) positive topline ENHANCE-IT data (the "Milestone"). The option vests as to 1/3 upon achievement of the Milestone, with the remaining options to vest 1/3 on the first anniversary of such Milestone and 1/3 on the second anniversary of such Milestone.

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.