FORM	4
------	---

Check this box if no	
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 hours per response... 0.5

SEC 1474 (9-02)

#### 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 WIKLER MATT	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					
(Last) C/O MATINAS H INC., 1545 ROU		3. Date of Earliest Transaction (Month/Day/Year) 12/31/2020						Officer (give title below)	Other (specify b	below)		
BEDMINSTER,,	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	n Date, if Code (Instr. 8)		*			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form: Bene	Beneficial Ownership	
				Code	v	Amount	or (D)	Price		(I) (Instr. 4)	(1150.4)	
Common Stock		12/31/2020		А		11,673 ( <u>1)</u>	А	\$ 0	244,303	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on	Numl	ber	and Expiration	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/Year) U		Underlying Securi		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)			rative		Securities (Instr. 5)		Beneficially	Derivative	Ownership		
	Derivative					Secur		es (		(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			0	Direct (D)	
						(A) 0							1	or Indirect	
						Disposed					Transaction(s)				
						of (D	· · · · · · · · · · · · · · · · · · ·					(Instr. 4)	(Instr. 4)		
						(Instr									
						4, and	15)								
											Amount				
								Date	Expiration		or				
									xercisable Date	Title	Number				
								Encreisable	dole Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

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

### Signatures

/s/\_Keith A. Kucinski, attorney-in fact for Matthew Wikler

Signature of Reporting Person

01/04/2021 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) On December 31, 2020, the Reporting Person was issued 11,673 shares of common stock par value \$.0001 per share pursuant to the Issuer's Amended and Restated 2013 Equity Compensation Plan. Such shares vest immediately upon grant.

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.