FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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INITIAL STATEMENT OF 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* Michaels Adam Laurance 2. Date of Event Requiring Stateme (Month/Day/Year) 10/07/2022				statement /Year)	3. Issuer Name and Ticker or Trading Symbol MamaMancini's Holdings, Inc. [MMMB]							
(Last) 34 HASTIN	(First)	(Middle)	- 10/07/202	.2	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner V Officer (give Other (specify)			If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line)				
(Street) TENAFLY	NJ	07670	_		X	title below) Chief Executiv	below)	below)		X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr.	Form: I (D) or I			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock						100,049	I	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security Conver (Instr. 4) Conver			Convers	cise Form:	6. Nature of Indirect Beneficial Ownership (Instr.			
				Expiration Date	Title	Amount Deriva		Price of Derivati Security	ve or Indirect		5)	

Explanation of Responses:

/s/ Adam Laurance Michaels

10/17/2022

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).