FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
haira nas saananaa.									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

intende defense	es of the issuer d to satisfy the conditions of lee Instruction 1	affirmative Rule 10b5-																		
Name and Address of Reporting Person* The Company of the Com				2. Issuer Name and Ticker or Trading Symbol Mama's Creations, Inc. [MAMA]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Toto Thomas G.				1	100 0			<u>, 1110</u>	<u>.</u> [·				:	X Director 10% Owner						
,														-		er (give titl	е		(specify	
(Last) (First) (Middle) C/O MAMA'S CREATIONS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024									belov	/)		below)	
	NCA ROAI																			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
EAST	NII		7072											X Form filed by One Reporting Person						
RUTHE	RFORD ^{NJ}	U	7073												Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)																	
		Table	l - No	on-Deriva	tive Se	ecur	ities	Acc	μired,	Dis	posed of	f, or I	Bene	ficia	ılly Owr	ed				
Date				2. Transaction Date (Month/Day/	//Year) Execut		eemed ition Date, h/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed Code (5) and 5)						5. Amou Securiti Benefici Owned Followin	ies For cially (D) Ind ing (In:		: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or P	rice	Reporte Transac (Instr. 3	tion(s)				
Common Stock 05/15/2				05/15/20)24			J		16,918(1)	6,918 ⁽¹⁾ A		(1)	771,361			D			
Common Stock															66,667		1 1		See footnote ⁽²⁾	
		Tab	le II	- Derivativ (e.g., pu							osed of, convertib					d				
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/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration D (Month/Day/\)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		4)	erivative ecurity nstr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
				Code	V (A) (D)		(D)	Date Exercis	able	Expiration ble Date		Amor or Numl of Share	ber							

Explanation of Responses:

- 1. Shares issued to the reporting person in connection with a settlement agreement relating to purported option grants, as described further in the Issuer's Current Report on Form 8-K filed on May 17,
- 2. Shares held by Thomas and Andrea Toto, for which Thomas Toto is the beneficial owner.

/s/ Charles Lange, attorney in fact for Thomas Toto 05/17/2024

** 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.