FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

Name and Address of Reporting Person Karlin Dan				2. Issuer Name and Ticker or Trading Symbol Mind Medicine (MindMed) Inc. [MNMD]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O MIND ME	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2023								X	Officer (g below)		title Other (specify below) of Medical Officer							
ONE WORLD TRADE CENTER, SUITE 8500 (Street) NEW YORK NY 10007 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv	dividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Та	ble I - No	n-Deri	ivativ	e Se	curitie	s Acq	uired, I	Disp	osed of,	or l	Benefi	cially Ow	ned				
Date					Fransaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or I Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	(Instr. 3 and				(111541. 4)
Common Shares 03/0						3			S ⁽¹⁾		3,577	3,577 D S		\$3.51(2)	260,	260,505		D	
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)	tive Conversion bate Execution Date, ty (Instr. 3) or Exercise (Month/Day/Year) if any			ate, 1	4. Transaction Code (Instr. 8)		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 Amou Securities Underly Derivative Securit (Instr. 3 and 4)		derlying curity I)	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)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)			

Explanation of Responses:

- 1. Represents the number of Common Shares sold to satisfy withholding tax obligations in connection with the settlement of vested restricted stock units, pursuant to sell-to-cover elections.
- 2. The reported price is a weighted average sales price. This represents the price in United States Dollars using the conversion rate on March 1, 2023. These shares were sold in multiple transactions on March 1, 2023 at prices ranging from \$4.75 to \$4.80 CAD Dollars. The Reporting Person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Carrie Liao, Attorney-in-Fact 03/02/2023

** 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.