FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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 Barrow Robert					2. Issuer Name and Ticker or Trading Symbol Mind Medicine (MindMed) Inc. [MNMD]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Fir	st)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/24/2004								X	Officer (give title below)			Other (specify below)		
C/O MIND MEDICINE (MINDMED), INC. ONE WORLD TRADE CENTER, SUITE 8500													Chief Executive Officer						
ONE WORLD TRADE CENTER, SUITE 8500				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						I	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) NEW YOR	K NY	7	10007												,	•	ng Ferson one Reportin	g Person	
(City)	(Sta	ate)	(Zip)																
			Table I - Nor	n-Deriva	ative	Securiti	es Ac	quired, l	Disp	osed	of, or E	3enefi	cially Ow	ned					
Date			Date	lonth/Day/Year) if any		Execution Date,		Transaction Dispo		curities Acquired (A) or osed Of (D) (Instr. 3, 4 ar			Following i	rities eficially Owned owing Reported		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amoun	t	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Subordinate Voting Shares 03/24				03/24/2	24/2022		A		1,820,000(1)		A	\$0.00	4,033	33,367		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)	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 Exercisable at Expiration Date (Month/Day/Year)			7. Title and Amount Securities Underlyin Derivative Security and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisable		oiration e	Title	- [1	Amount or Number of Shares		Transaction((Instr. 4)	ion(s)			
Stock Option (Right to Buy)	\$1.18 ⁽²⁾	03/24/2022		A		2,910,000		(3)	03/	23/2027	Subord Voting S		2,910,000	\$0.00	6,425,5	500	D		

Explanation of Responses:

- 1. These shares represent restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one subordinate voting share of the Issuer. The RSUs vest in 48 equal monthly installments beginning on April 24, 2022, subject, to the Reporting Person providing continuous service to the Issuer on each such vesting date.
- 2. The option grant has an exercise price of \$1.48 Canadian Dollars. This represents the exercise price in United States Dollars.
- 3. The shares subject to the option vest and become exercisable with 1/48th of the total shares vesting monthly over 48 months from the vesting commencement date, March 24, 2022, subject to the Reporting Person providing continuous service to the Issuer as of each such vesting date.

Remarks:

/s/ Robert Barrow

03/28/2022

** 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.