SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

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 [*] <u>STERN ADAM K</u>			Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 07/14/2020 3. Issuer Name and Ticker or Trading Symbol ORGANOVO HOLDINGS, INC. [ONVO]						
(Last) (First) (Middle) 440 STEVENS AVENUE				4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 200 (Street)				X Director Officer (give title below)		.0% Owner Other (specify pelow)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
SOLANA BEACH	CA	92075								by More than One Person
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
		Та	ble I - Non	-Derivati	ve Securities Benefic	cially O	wned			
1. Title of Sec	curity (Instr. 4)	Та	ble I - Non	2	ve Securities Benefic 2. Amount of Securities Beneficially Owned (Instr. 4)	3. Own Form: D (D) or h (I) (Inst	ership Direct ndirect		ature of Indire ership (Instr.	
1. Title of Sec	urity (Instr. 4)		Table II - D	2 Perivative	2. Amount of Securities Beneficially Owned (Instr.	3. Own Form: I (D) or II (I) (Inst	ership Direct ndirect r. 5)	Own		
	urity (Instr. 4)	(e.g. y (Instr. 4)	Table II - D	Perivative s, warrar	2. Amount of Securities Beneficially Owned (Instr. 4) Securities Beneficia	3. Own Form: I (D) or II (I) (Inst ible sec ecurities	ership Direct ndirect r. 5)	Sion		

Explanation of Responses:

No securities are beneficially owned.

/S/ ADAM K. STERN

07/22/2020 Date

** Signature of Reporting Person

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 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).

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.