Form 5 obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Number:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB 0287 Expires: November 30, Estimated average burden hours per response...

OMB APPROVAL

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	ype Respons	ses)													
	nd Address ERTY BR	Symbol	Tonix Pharmaceuticals Holding Corp.					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% OwnerX Officer (give title Other (specify below)							
HOLDIN	NIX PHAF NG CORP, UITE 306	LS (Month/Day/	3. Date of Earliest Transaction (Month/Day/Year) 05/24/2013					SEE REMARKS							
NEW YO	ORK, NY		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)	Table I -	Non-De	rivati	ive Secur	rities	Acqui	red, Disposed	of, or	Beneficia	ally Owne	ed		
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction Code		ities d (A) d of (, 4 an	(D) d 5)	5. Amount of Securities Beneficially O Following Re Transaction(s)	ported	Form: Direct (or Indi	ship of In- Bene (D) Own	eficial ership		
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4	.)	(I) (Instr. 4	4)			
Common \$0.001 pa		05/24/2013		P		100	A	\$ 7.47	10,509		D				
Reminder: directly or		separate line for ea	ch class of securitie	s benefic	Pe	rsons w			nd to the colle				C 1474		
					rec	quired to	res	pond	ed in this form unless the fo control num	orm di			(9-02)		
			erivative Securitie g., puts, calls, wa	-		-			•	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	3A. Deemed Execution Date,	f Trans Code	action	5. n Number of Derivar Securit Acquir (A) or Disposo of (D) (Instr. 4, and	tive ies ed	6. Date and Exp	Exercisable piration Date //Day/Year)	Secur (Instr. 4)	ınt of rlying		f 9. Number of e Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficial Ownershi (Instr. 4)
					**			Date Exercis	Expiration able Date	Title	or Number of				

Reporting Owners

Reporting Owner Name / Address		Relationships					
		10% Owner	Officer	Other			
DAUGHERTY BRUCE							
C/O TONIX PHARMACEUTICALS HOLDING CORP			SEE REMARKS				
509 MADISON AVE., SUITE 306			SEE REIVIT HORS				
NEW YORK, NY 10022							

Signatures

/s/ Bruce Daugherty	05/28/2013
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

Remarks:

Senior Director of Drug Development and Secretary

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.