FORM 4

ľ

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB 3235-Number: 0287 Expires: November 30, 2011 Estimated average burden hours per response... 0.5

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

erson [*]	2. Issuer Na Symbol Tonix Phar [TNXP] 3. Date of Eat (Month/Day/ 08/14/2013 4. If Amendn Filed(Month/Day	maceuti rliest Tra Year) nent, Dat	cals	Holdin	e	rp.	X Director Officer (give title pelow)	applicable) 10% Ow Other (s	vner pecify below)	
CALS	(Month/Day/ 08/14/2013 4. If Amendn	Year) nent, Dat				-		iroun Filing	Charle	
			e Ori	iginal			C Individual and C 1/2/	Troup Filing	Charle	
(Street) NEW YORK, NY 10022							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) (State) (Zip)				ive Secur	rities A	Acqui	ired, Disposed of, or Beneficially Owned			
ar) any	Deemed ecution Date, if onth/Day/Year)			4. Securi Acquired Disposed (Instr. 3, Amount	d (A) d d of (I 4 and (A) or	D) [5]	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership	
		Р		5,883	A	<u>(1)</u>	22,550	D		
			Code P			Code V Amount (D)	Code V Amount (D) Price	Code V Amount (D) Price (Instr. 3 and 4)	Code V Amount (A) or or (Instr. 3 and 4) (I) (Instr. 4)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of				4.				Date Exerci		7. Title and			9. Number of		11. Nature
	Conversion		Execution Date, if					Expiration Da		Amount of		Derivative		Ownership	
Security		(Month/Day/Year)		Code		Deriva	tive	(Month/Day/Y	(ear)	Underlying	3	Security			Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securit	ies			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquir	ed			(Instr. 3 an	d 4)		Owned	Security:	(Instr. 4)
	Security					(A) or							Following	Direct (D)	
						Dispos	ed						-	or Indirect	
						of (D)							Transaction(s)	(I)	
						(Instr. 1	3, 4,						(Instr. 4)	(Instr. 4)	
						and 5)									
											Amount				
								Dete	E		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				
Series A															
common															
stock	\$ 4.25	08/14/2013		Р		5,883		08/14/2013	08/14/2018	common	5,883	(1)	5,883	D	
	-	00/14/2013		r		5,005		00/14/2013	00/14/2018	stock	5,885	<u>(1)</u>	5,005	D	
purchase															
warrant															

Reporting Owners

Den article Origina Name (Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Saks Samuel R C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 306 NEW YORK, NY 10022	Х						

Signatures

/s/ Samuel Saks	08/15/2013
-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).
- (1) Included in the purchase of 5,883 Units at a price of \$4.25 per Unit. Each Unit consisted of one share of common stock and one Series A Warrant exercisable immediately for one share of common stock at an exercise price of \$4.25 per share

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.