### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### FORM 8-K

#### CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of report (date of earliest event reported): January 7, 2014

### TONIX PHARMACEUTICALS HOLDING CORP.

(Exact name of registrant as specified in its charter)

Nevada (State or Other Jurisdiction of Incorporation) 001-36019 (Commission File Number) 26-1434750 (IRS Employer Identification No.)

509 Madison Avenue, Suite 306, New York, New York 10022 (Address of principal executive offices) (Zip Code)

Registrant's telephone number, including area code: (212) 980-9155

Copy of correspondence to:

Marc J. Ross, Esq. James M. Turner, Esq. Sichenzia Ross Friedman Ference LLP 61 Broadway New York, New York 10006 Tel: (212) 930-9700 Fax: (212) 930-9725

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

□ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

□ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

□ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

□ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

#### ITEM 7.01 Regulation FD Disclosure.

Tonix Pharmaceuticals Holding Corp. (the "Company") intends to utilize an updated investor presentation to conduct meetings with investors, stockholders and analysts and at investor conferences, and which the Company intends to place on its website, which may contain non-public information. A copy of the presentation is filed as Exhibit 99.01.

The information contained in Item 7.01 of this Current Report on Form 8-K, including Exhibit 99.01, is furnished pursuant to, and shall not be deemed to be "filed" for the purposes of, Section 18 of the Securities Exchange Act of 1934, as amended, or otherwise subject to the liabilities of that section. The information contained in Item 7.01 of this Current Report shall not be incorporated by reference into any registration statement or any other document filed pursuant to the Securities Act of 1933, as amended, except as otherwise expressly stated in such filing. By filing this Current Report on Form 8-K and furnishing the information contained in this Item 7.01, including Exhibit 99.01, the Company makes no admission as to the materiality of any such information that it is furnishing.

#### ITEM 9.01 Financial Statements and Exhibits.

(d) Exhibits.

99.01 Corporate Presentation by the Company for January 2014\*

\* Furnished herewith.

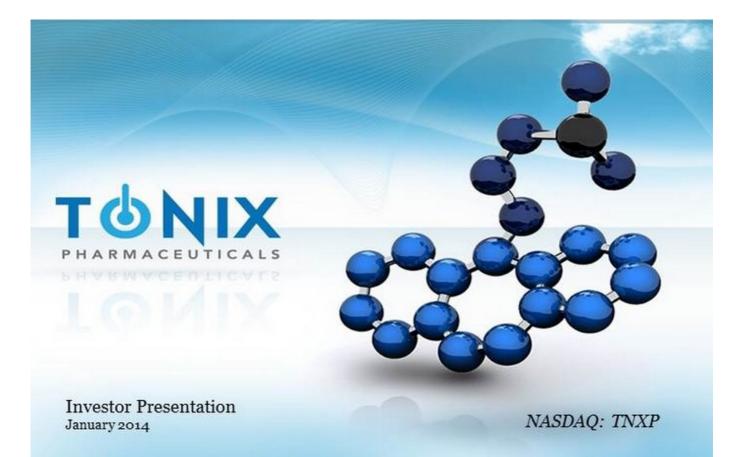
#### SIGNATURE

Pursuant to the requirement of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

#### TONIX PHARMACEUTICALS HOLDING CORP.

Date: January 7, 2014

By: <u>/s/ LELAND GERSHELL</u> Leland Gershell Chief Financial Officer



### Safe Harbor Statement

Certain statements in this presentation regarding strategic plans, expectations and objectives for future operations or results are "forward-looking statements" as defined by the Private Securities Litigation Reform Act of 1995. These statements may be identified by the use of forward-looking words such as "anticipate," "believe," "forecast," "estimate" and "intend," among others. These forward-looking statements are based on TONIX's current expectations and actual results could differ materially. There are a number of factors that could cause actual events to differ materially from those indicated by such forward-looking statements. These factors include, but are not limited to, substantial competition; our ability to continue as a going concern; our need for additional financing; uncertainties of patent protection and litigation; uncertainties of government or third party payer reimbursement; limited sales and marketing efforts and dependence upon third parties; and risks related to failure to obtain U.S. Food and Drug Administration clearances or approvals and noncompliance with its regulations. As with any pharmaceutical under development, there are significant risks in the development, regulatory approval and commercialization of new products. The forward-looking statements in this presentation are made as of the date of this presentation, even if subsequently made available by the Company on its website or otherwise. TONIX does not undertake an obligation to update or revise any forward-looking statement, except as required by law. Investors should read the risk factors set forth in the amended Annual Report on Form 10-K/A for the year ended December 31, 2012, as filed with the Securities and Exchange Commission (the "SEC") on November 22, 2013 and future periodic reports filed with the SEC on or after the date hereof All of the Company's forward-looking statements are expressly qualified by all such risk factors and other cautionary statements.

# **Tonix At-A-Glance**

Ticker	ТМХР
Exchange	NASDAQ Capital Market
Cash at 9/30/13	\$7.4 million
Shares outstanding*	5.8 million
Year Founded	2007
Independent Directors	7

\* As of December 30, 2013

# **Investment Thesis**

### Fibromyalgia trial underway for TNX-102 SL (sublingual cyclobenzaprine) Top line results of Phase 2b/3 trial to be reported in 2H 2014

Anticipated to be the first of two pivotal trials required for FDA approval Strong evidence of clinical benefit in Phase 2a \$1.5B U.S. market; 5M patients in U.S.; large unmet need

#### **Robust pipeline of products**

Post-traumatic stress disorder (PTSD): Phase 2 trial to begin in 3Q 2014 Tension headache: Pre-IND meeting to be held in 1Q 2014

### Repurposing and reformulating strategy

Capital- and time- efficient FDA approval path Reduced development risk

### All intellectual property owned by Tonix outright - no royalties

#### Experienced management and board of directors

Track record of success in drug approvals and value creation

# Advantages of "repurposed/reformulated" vs. "new" drugs

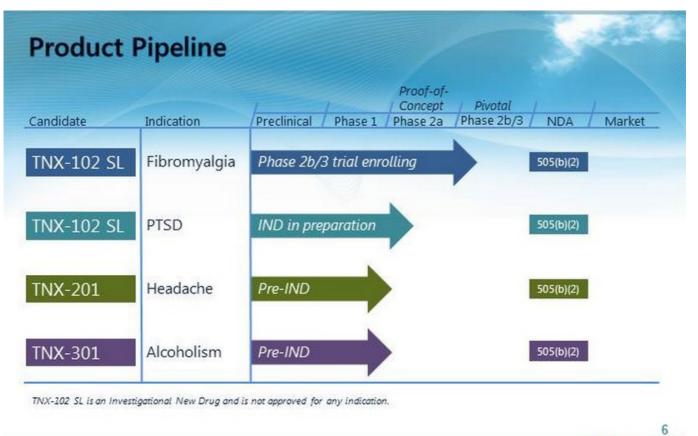
Active Ingredient	FDA Term	Safety	Risk to Develop	Cost to Develop	Time to Develop
New	505(b)1	Unknown	Higher	Higher	Longer
Repurposed/ Reformulated	505(b)2	Known	Lower	Lower	Shorter

### **New Drugs**

Face high hurdles for showing safety Many target niche markets like orphan diseases or rare cancers

### Repurposed/Reformulated Drugs

Can address larger, more novel indications than new drugs Patent strategy can provide significant market exclusivity



# Fibromyalgia – a significant therapeutic market

### 5 million U.S. patients\*

2.6 million diagnosed; 2.4 million receiving treatment\*\*

### \$1.5 billion U.S. prescription drug market in 2012\*\*\*

14% CAGR 2007-12

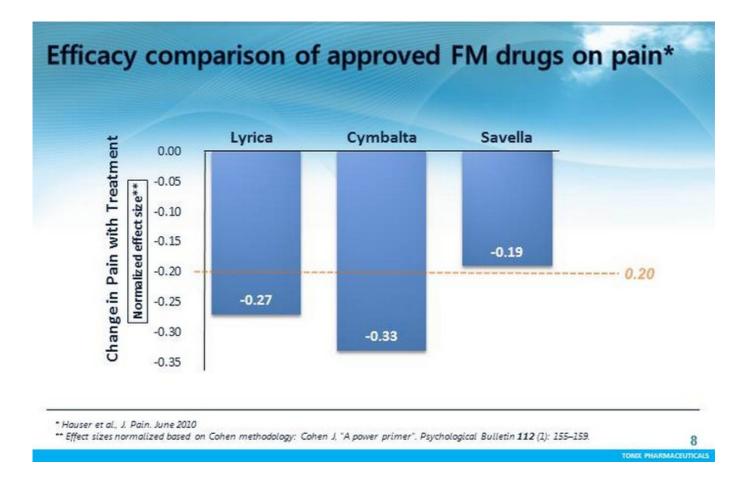
Category	Product	Company	Prior Indication	Approval Year in FM	2012 U.S. Sales in FM***
Membrane Stabilizer	Lyrica <sup>®</sup>	Pfizer	Pain (neuropathic)	2007	\$475 million
10000	Cymbalta <sup>®</sup>	Eli Lilly	Depression	2008	\$600 million
SNRI	Savella <sup>®</sup>	Forest	Depression*	2009	\$100 million
Sleep Quality	TNX-102 SL	Tonix	Muscle Spasm	2017E	

\* National Institutes of Health, U.S. Department of Health and Human Services

\*\* Robinson et al, Pain 2012; 13: 1366-76.

\*\*\* Estimates based on information from publicly-available sources

\* EU only



# Fibromyalgia: a large opportunity for an effective, well-tolerated, differentiated product

#### Patients feel pain all over the body, but it originates in the brain

Chronic, widespread pain with sleep, fatigue, mood, and memory problems Impairs daily function and productivity: poor quality of life Predominantly female

#### Patients remain unsatisfied despite approved products

FDA has selected FM as one of 20 conditions for patient input Patients often take multiple medications ("polypharmacy") 'Off-label' use of opioids and sedative-hypnotics → no sustained benefit

#### Expensive, burdensome condition for healthcare system

Health utilization and medication costs are substantial Managed care / payors recognize need for new therapies

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TONIX PHARMACI

# Inter-relationship of pain and poor quality sleep: new target for drug therapy

#### >90% of FM patients complain of poor sleep quality\*

Non-restorative sleep linked to hyper-vigilance Restorative sleep improves FM symptoms

### Sleep quality of FM patients can be objectively measured: Cyclic Alternating Pattern (CAP)

A1 patterns indicate sleep stability

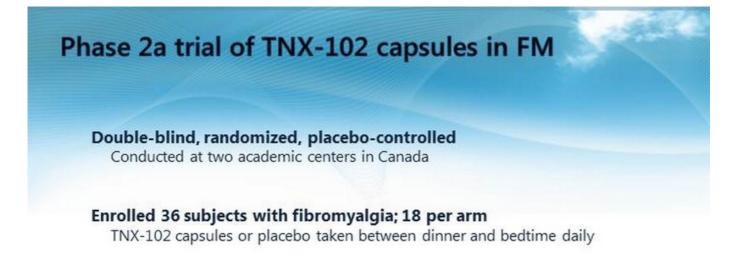
A2, A3 patterns indicate sleep instability (poor sleep quality)

### Drugs that decrease A2, A3 as percent of total CAP also improve FM symptoms\*\*

Sodium oxybate: a potent hypnotic, not approved for FM

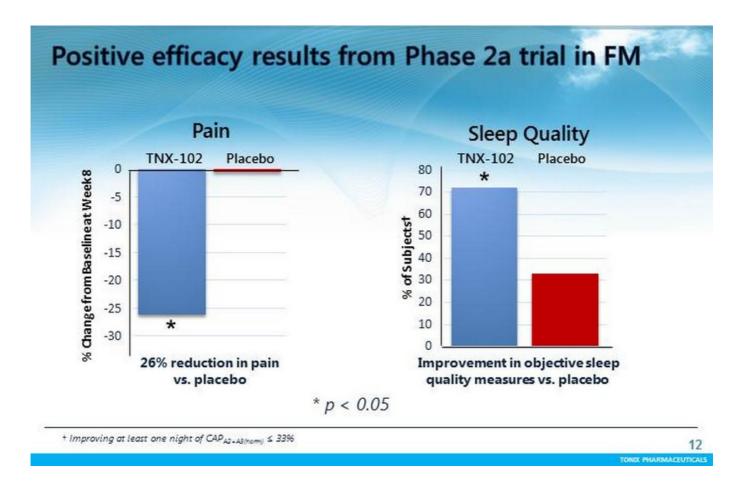
TNX-102: low-dose cyclobenzaprine (CBP), a drug previously approved at higher doses as a muscle relaxant

\* Source: Swick, Ther. Adv. Musculoskel. Dis. 2011;3(4):167-178. \*\* Source: Moldofsky et al., J. Rheum. October 2010.



Eight-week, dose-escalating study Daily dosing ranged from 1 – 4 mg of TNX-102

Source: Moldafsky et al., J. Rheum. December 2011: http://irheum.org/content/early/2011/08/30/irheum.110194.full.pdf+html



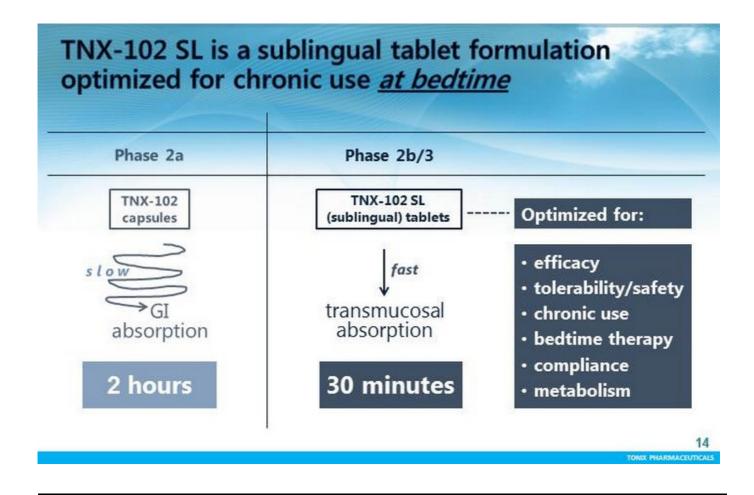
# Safety results from Phase 2a trial in FM

Adverse Event	TNX-102, %	Placebo, %
Any adverse event	83	83
Headache	39	17
Dry mouth	33	6
Somnolence	22	11
Constipation	17	6
Dizziness	17	6
Nausea	11	28
Flu syndrome	11	6
Rhinitis	11	6
Pruritus	11	0

No serious adverse events

No discontinuations due to adverse events in treatment arm

Types of adverse events consistent with approved cyclobenzaprine products



# TNX-102 SL: first-in-class fibromyalgia medicine



### Targets pain and poor sleep

Unique mechanism of action among marketed FM products

### Sublingual tablet at bedtime

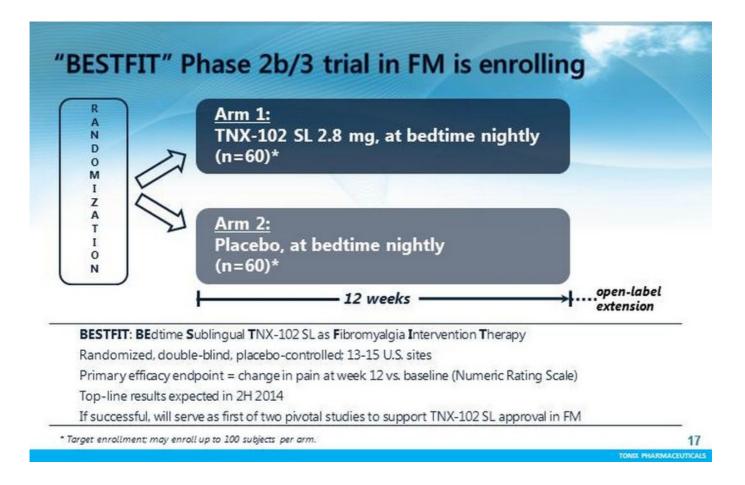
Fast onset aligns exposure with sleeping period Designed to optimize ease-of-use, compliance

Very low dose - 2.8 mg per day Daytime tolerability Developed for long-term use

### **Evidence of clinical benefit** Positive clinical experience with TNX-102 capsules

### **Registrational program underway**

TNX-102 SL – registration program in FM	
Pre-Phase 3 meeting held with FDA in February 2013	
Remaining clinical work to support New Drug Application:	
Two adequate and well-controlled efficacy and safety trials in FM patients Primary efficacy endpoint = pain	
🗹 First trial is enrolling – "BESTFIT"	
Long-term exposure data to support chronic use label 100 subjects for six months, 50 subjects for one year	
Open-label extension study is enrolling	
Definitive repeat dose pharmacokinetic "bridging" study	



# **Post-Traumatic Stress Disorder**

### **Overlap between PTSD and FM**

~50% of FM or PTSD patients meet criteria for the other disorder

### Patients experience disturbed sleep and widespread pain

Core defining feature is hyper-vigilance – can disturb sleep Painkiller abuse and addiction are common

### 3.5% of U.S. adult population has suffered from PTSD in past 12 months\*

Experiencing any trauma can lead to PTSD High incidence among U.S. soldiers and veterans Associated with suicide and unpredictable violent behaviors Patients desperate despite two FDA approved drugs; no new treatment in >10 years

### Phase 2 study of TNX-102 SL expected to commence in 3Q 2014

Pre-IND meeting held with FDA Leverage fibromyalgia formulation, clinical experience, manufacturing know-how

\* National Institutes of Mental Health & National Institutes of Health 2010

# Pipeline

TNX-201 (pure isomer isometheptene) for tension-type headache

Isometheptene has been used in the U.S. for > 50 years as a treatment for headache, but is not FDA approved for any indication\*

Limited availability via compounding pharmacies

Over-the-counter medications are inadequate for many patients

> Pre-IND meeting with FDA is scheduled for Q1 2014

#### TNX-301 (disulfiram/selegiline) for alcoholism

Disulfiram has been used in the U.S. for > 50 years as a treatment for maintaining sobriety

The addition of selegiline is designed to improved compliance – the major limiting factor to widespread use of disulfiram

 Products containing isometheptene are being marketed as unapproved products in the U.S.; marketing withdrawal has been sanctioned by the FDA since 2012

	Pharmacokinetics (PK) Patents filed around unique PK profile Protection expected to 2033	
TNX-102 SL	Composition-of-matter Patent filed - "Eutectic" Protection expected to 2034	
	<b>Method-of-use</b> FM: patent issued, 3Q 2020 expiry PTSD: patent filed in 2010	
TNX-201	Composition-of-matter Patent filed – pure isomer Protection expected to 2033	
TNX-301	Method-of-use Alcoholism: patent allowed, 4Q 2021 expiry	

## **Milestones – Recent and Upcoming**

### Corporate

- ☑ 8/9/13 TNXP stock uplisted to NASDAQ
- ☑ 8/14/13 Gross proceeds of \$11.4 million from underwritten offering

### TNX-102 SL (FM)

- If 3Q 2013 Began Phase 2b/3 trial in FM
- 9 4Q 2013 Began open-label extension study in FM
- 2H 2014 Top line results of Phase 2b/3 trial in FM

### Pipeline

- □ 1Q 2014 Pre-IND meeting for TNX-201 for tension-type headache
- Q 2014 File IND for TNX-102 SL in PTSD
- 3Q 2014 Begin Phase 2a trial of TNX-102 SL in PTSD

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# Why Invest in Tonix?

- TNX-102 SL: late-stage clinical program in large market indication
  - Strong evidence of clinical benefit in Phase 2a
  - · Active ingredient has established safety profile at higher doses
- Multiple opportunities (fibromyalgia, PTSD, headache, alcoholism)
  - FDA 505(b)(2) regulatory pathway offers risk/reward advantage
- Team distinguished by track record of drug development success
- Well-capitalized to execute on key near-term milestones



