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): March 23, 2015

TONIX PHARMACEUTICALS HOLDING CORP.

(Exact name of registrant as specified in its charter)

Nevada	**001-36019**	**26-1434750**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(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:

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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 March 2015*

_____

* 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: March 23, 2015

By: */s/ SETH LEDERMAN*
Seth Lederman
Chief Executive Officer

Exhibit 99.1

NASDAQ: TNXP

March 2015

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 possible need for additional financing; uncertainties of patent protection and litigation; uncertainties of government or third party payor reimbursement; limited research and development 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 Annual Report on Form 10-K for the year ended December 31, 2014, as filed with the Securities and Exchange Commission (the "SEC") on February 27, 2015 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 PHARMACEUTICALS

New approaches to treating CNS disorders

First-in-class medicines for common disorders of the central nervous system (CNS)

- Innovative treatment paradigms
- Late stage candidates
- Large unmet medical needs

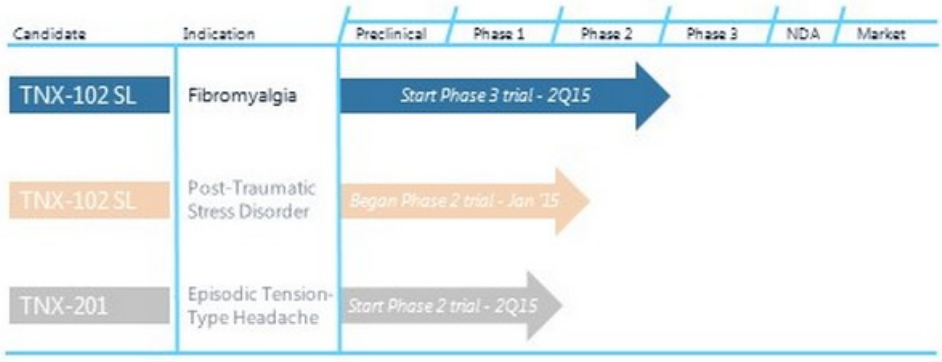
Entered 2015 with three clinical development programs

Capitalized to achieve key clinical readouts in all three programs

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg and TNX-201 ((R)-isometheptene mucate) are Investigational New Drugs and are not approved for any indication.

TONIX PHARMACEUTICALS

Pipeline led by TNX-102 SL for fibromyalgia



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TONIX PHARMACEUTICALS

Fibromyalgia market opportunity

Estimated to affect 5 - 15 million U.S. adults*

Three FDA approved prescription medications:

Class	Product	Company	Approval Year in FM
Membrane Stabilizer	Lyrica®	Pfizer	2007
SNRI	Cymbalta®	Eli Lilly	2008
	Savella®	Forest	2009

Tonix is pursuing a different approach:

Sleep Quality	TNX-102 SL	Tonix	1H19E

** Lawrence et al. Arthritis Rheum 2008;58:26-35; Vincent et al. Arthritis Care Res 2013;65:786-792.*
*** Estimates based on information from publicly-available sources*
SNRI = Serotonin Norepinephrine Reuptake Inhibitor

TONIX PHARMACEUTICALS

"AFFIRM" Phase 3 trial of TNX-102 SL in Fibromyalgia

Randomized, double-blind, placebo-controlled trial in fibromyalgia

N=500; 30 - 35 U.S. clinical sites

Primary efficacy endpoint:
Difference in 30% responder analysis at 12 weeks between TNX-102 SL 2.8 mg and placebo – primary efficacy endpoint based on FDA written acceptance

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

Sleep quality is a new target for fibromyalgia therapy

Restorative sleep improves pain and other fibromyalgia symptoms
- >90% of fibromyalgia patients complain of poor sleep quality*
- Sleep quality improvement is not a feature of approved medications

Phase 2a study with low-dose cyclobenzaprine (CBP) capsule showed proof-of-concept**

TNX-102 SL is a sublingual tablet formulation of CBP
- Pharmacokinetic profile well-suited to bedtime administration
- Tolerability profile well-suited to chronic use

Phase 2b BESTFIT results support Phase 3 program in fibromyalgia
- Contribute to evidence of efficacy to support the planned NDA
- Phase 3 trial to begin in 2Q 2015

** Swick, Ther Adv Musculoskel Dis 2011;3:167-178.*
*** Moldofsky et al, J Rheum 2011;38:2653-63.*
TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication.

TONIX PHARMACEUTICALS

BESTFIT Phase 2b trial in fibromyalgia

BESTFIT = BEdtime Sublingual TNX-102 SL as Fibromyalgia Intervention Therapy

Randomized, double-blind, placebo-controlled trial
2010 American College of Rheumatology diagnostic criteria for fibromyalgia
205 participants were randomized 1:1 at 17 U.S. sites
One sublingual tablet of TNX-102 SL 2.8 mg or placebo daily at bedtime for twelve weeks

Primary efficacy endpoint

Mean change from baseline in the daily diary pain score during week 12
11-point (0-10) Numerical Rating Scale (NRS) to assess prior 24-hour average pain intensity

First Patient – First Dose
September 2013

→

Last Patient – Last Dose
August 2014

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication.

TONIX PHARMACEUTICALS

TNX-102 SL improved pain in fibromyalgia in the BESTFIT study

Outcome Measure at Week 12	Intent-to-Treat Population[+]	*p* value	Method
Daily Pain Diary, NRS	Mean Change**	0.086 0.172	MMRM JTC-MI
Daily Pain Diary, NRS	Proportion Achieving 30% Improvement*	0.033	LR
Clinic NRS 7-day pain recall	Mean Change	0.029	MMRM
FIQ-R Pain Item	Mean Change	0.004	MMRM

NRS = Numeric Rating Scale for pain; **FIQ-R** = Fibromyalgia Impact Questionnaire-Revised
MMRM = Mixed-Effect Model Repeated Measure; **JTC-MI** = Jump to Control-Multiple Imputation (FDA-preferred analysis); **LR** = Logistic Regression

** Declared primary endpoint; was primary endpoint for FDA approvals of Lyrica and Cymbalta
* Declared secondary endpoint; will be the primary endpoint in the upcoming Phase 3 study
+ N=205 (TNX-102 SL N=103, placebo N=102)

p < 0.05 → achieved statistical significance

Source: Phase 2b BESTFIT study preliminary data
TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

TNX-102 SL improved sleep quality in fibromyalgia in the BESTFIT study

Outcome Measure at Week 12	Intent-to-Treat Population	*p* value	Method
Daily Sleep Quality Diary, NRS	Mean Change*	<0.001	MMRM
PROMIS Sleep Disturbance	T-score Change*	0.005	MMRM
FIQ-R Sleep Quality Item	Mean Change	<0.001	MMRM

PROMIS – Patient-Reported Outcomes Measurement Information System

* Declared secondary endpoint

$p < 0.05$ → achieved statistical significance

Source: Phase 2b BESTFIT study preliminary data
TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

TNX-102 SL broadly improved fibromyalgia symptoms in the BESTFIT study

Outcome Measure at Week 12	Intent-to-Treat Population	*p* value	Method
Patient Global Impression of Change	Responder Analysis*	0.025	LR
FIQ-R Total Score	Mean Change*	0.014	MMRM
FIQ-R Symptom Domain	Mean Change	0.004	MMRM
FIQ-R Function Domain	Mean Change	0.060	MMRM
FIQ-R Anxiety Item	Mean Change	0.015	MMRM
FIQ-R Sensitivity Item	Mean Change	0.017	MMRM
FIQ-R Stiffness Item	Mean Change	0.039	MMRM

* Declared secondary endpoint

$p < 0.05$ → achieved statistical significance

Source: Phase 2b BESTFIT study preliminary data
TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

TNX-102 SL was well-tolerated in the BESTFIT Study

No serious adverse events (SAE) reported with TNX-102 SL

Systemic adverse events reported by at least 3.0% of the total study population	TNX-102 SL *(N=103)*	Placebo *(N=101)*	Total *(N=204)*
Somnolence	1.9	6.9	4.4
Dry Mouth	3.9	4.0	3.9
Back Pain	4.9	3.0	3.9

Most frequent local adverse events were administration site reactions

- Previously reported in TNX-102 SL Phase 1 studies; no detectable bias on efficacy results
- Transient tongue numbness (42% TNX-102 SL vs. 1% placebo)
- Abnormal taste (8% TNX-102 SL vs. 0% placebo)

Trial completion rates of 86% with TNX-102 SL vs. 83% with placebo

Source: Phase 2b BESTFIT study preliminary data
TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

Registration program for TNX-102 SL in fibromyalgia

Phase 2b BESTFIT study confirmed activity and tolerability

- Statistically-significant improvements across key fibromyalgia symptoms were observed
- Systemic tolerability similar to placebo
- 2.8 mg daily dose confirmed for future development

Phase 3 AFFIRM study to commence in 2Q 2015

- Randomized, double-blind, parallel-group, placebo-controlled
- N=500; 30-35 U.S. sites; 1:1 randomization
- 12-week study similar to the BESTFIT design
- One sublingual tablet of TNX-102 SL 2.8 mg or placebo daily at bedtime

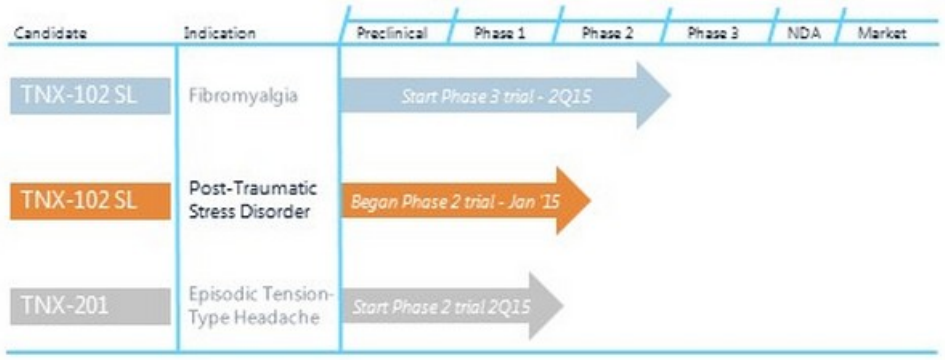
30% responder analysis at 12 weeks* – primary efficacy endpoint based on FDA written acceptance

** TNX-102 SL demonstrated p=0.03 in BESTFIT 30% pain responder analysis (pre-specified secondary endpoint)*

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

Phase 2 trial of TNX-102 SL for PTSD is recruiting



TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg and TNX-201 ((R)-isometheptene mucate) are Investigational New Drugs and are not approved for any indication.

TONIX PHARMACEUTICALS

PTSD: A significant and growing public health problem

Post-traumatic stress disorder is a chronic, debilitating condition

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

Among 8.5 million U.S. patients, approximately half are receiving medical treatment*

FDA approved prescription medications:

Class	Product	Company	Approval Year in PTSD
SSRI	Paxil®	Glaxo	2001
	Zoloft®	Pfizer	1999

Tonix is pursuing a different approach:

Sleep Quality	TNX-102 SL	Tonix	2H19E

** Kessler et al, Arch Gen Psych 2005;62:617-627; Wang et al., Arch Gen Psych 2005;62:629-640.*
SSRI = Selective Serotonin Reuptake Inhibitor

TONIX PHARMACEUTICALS

Sleep quality is a new target for PTSD treatment

Poor sleep quality after trauma is linked to onset of PTSD

PTSD patients complain of poor sleep quality as a core symptom
- Distressing dreams (nightmares) are part of "re-experiencing"
- Restless sleep is part of "hyper-arousal"
- Correlated with depression, substance abuse and suicide

Military-related PTSD is an unmet need
- Evidence suggests that SSRIs may be ineffective in military-related PTSD

Response of PTSD in men to SSRIs has not been adequately studied

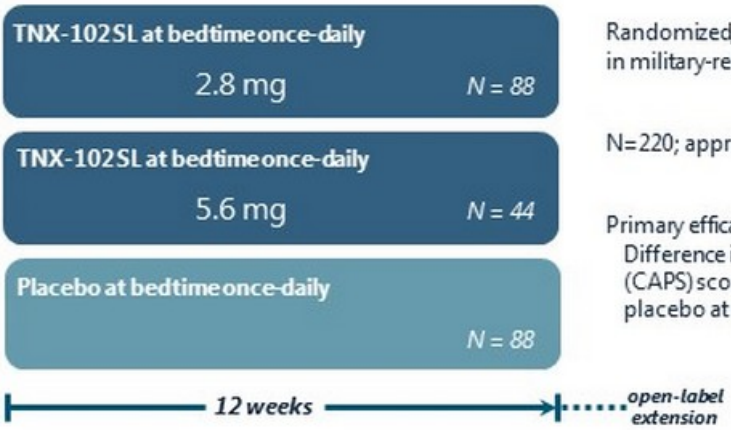
TNX-102 SL targets mechanisms associated with treating disturbed sleep in PTSD

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

"AtEase" Phase 2 trial of TNX-102 SL in PTSD

www.ateasestudy.com



Randomized, double-blind, placebo-controlled trial in military-related PTSD

N=220; approximately 25 U.S. clinical sites

Primary efficacy endpoint:
Difference in Clinician-Administered PTSD Scale (CAPS) score between TNX-102 SL 2.8 mg and placebo at eight weeks

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

PTSD program with TNX-102 SL

Fibromyalgia program informs development of TNX-102 SL in PTSD

Safety data from fibromyalgia studies are potentially supportive for PTSD program

Efficacy data support potential for activity in PTSD

Improvements in several outcomes analyses of BESTFIT that relate to PTSD core symptoms: sleep; FIQ-R sensitivity; and FIQ-R anxiety

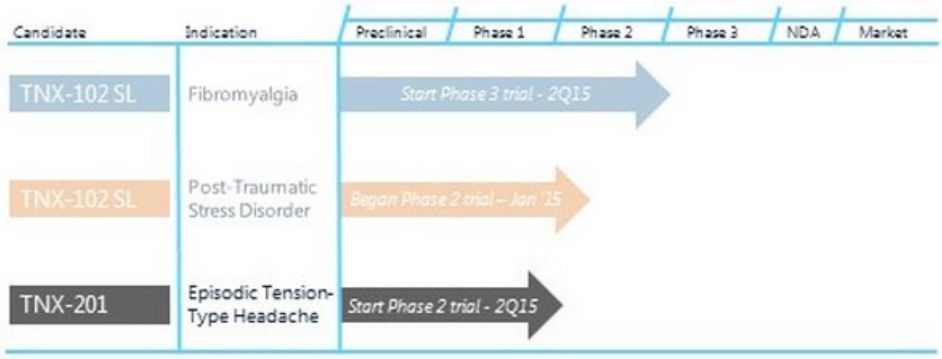
2.8 mg dose supported by BESTFIT study results

Phase 2 study of TNX-102 SL in military-related PTSD ("AtEase") is enrolling

TNX-102 SL (cyclobenzaprine HCl sublingual tablet) 2.8 mg is an Investigational New Drug and is not approved for any indication

TONIX PHARMACEUTICALS

TNX-201 in development for episodic tension-type headache



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TONIX PHARMACEUTICALS

Episodic tension-type headache (ETTH)

75 million adults in the U.S. experience frequent episodic tension-type headaches*

- Constant band of pressure on the back/sides of head; "squeezed in a vice" feeling
- "Frequent" = one to 15 headaches per month over a three-month period
- Approximately 60% receive treatment**

All of the FDA approved prescription medications contain barbiturates

- Over-the-counter medications are inadequate for many
- No new medications introduced for >40 years

Class	Product	Company	Regulatory Status	Approval Year in ETTH
Barbiturate	Fiorinal®	Actavis	Approved NDA	1976
	Fioricet®	Actavis	Approved NDA	1992
Barbiturate + Opiate	Fiorinal with Codeine®	Actavis	Approved NDA	1990

** Schwartz et al., JAMA 1998;279:381-383; Chowdhury, Ann Ind Acad Neurol 2012;15:83-88; company analysis of public literature.*
*** Scher et al., Cephalalgia 2010;30:321-328; company analysis of public literature.*

TONIX PHARMACEUTICALS

TNX-201 in clinical development for ETTH

TNX-201 is (R)-isometheptene mucate
- Tonix is developing TNX-201 for ETTH
- Phase 2 study to begin in 2Q 2015

Racemic isometheptene mucate is a mixture of (R) and (S) isomers
- Had been widely prescribed for many decades in the U.S. as:
  - a single-agent medicine (pre-1962)
  - a component of combination drug products
    - Midrin® – NDA withdrawn
    - Prodrin® – marketed under "unapproved drug category"

No product containing isometheptene mucate is currently FDA approved for any indication

Phase 2 trial of TNX-201 in ETTH to begin in 2Q15

Randomized, double-blind, placebo-controlled trial in episodic tension-type headache

N=200; approximately 10 U.S. clinical sites

Primary efficacy endpoint:

Number of subjects who report "pain free" at two hours following one dose of study medication (upon first ETTH episode experienced)

To report top-line results in 4Q 2015

TNX-201 ((R)-isometheptene mucate) is an Investigational New Drug and is not approved for any indication.

TONIX PHARMACEUTICALS

Isometheptene (IMH) isomers have distinct pharmacological activities

TNX-201 is a single isomer of IMH

The (R) and (S) isomers of IMH have different pharmacologies

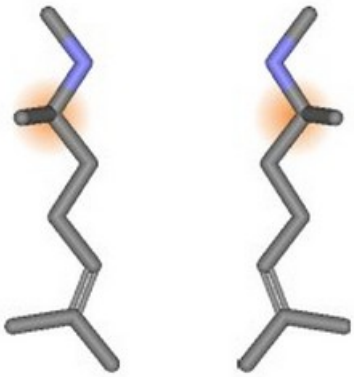
Previously marketed IMH drugs were a mixture of two mirror-image isomers (racemic IMH)

(R) isomer ✓

- Analgesic
- Binds to imidazoline-1 receptor
- Inactive on adrenergic receptors

↓

TNX-201



(S) isomer ✗

- Sympathomimetic

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Phase 1 study of TNX-201 completed

Phase 1 study in healthy volunteers

Single ascending dose study (N=45) – three cohorts of 15 subjects
Randomized to TNX-201, racemic IMH, or placebo (3:1:1 ratio, resp.)

	TNX-201 35 mg *(N=9)*	TNX-201 70 mg *(N=9)*	TNX-201 140 mg *(N=9)*	Racemic IMH 70 mg *(N=9)*	Placebo *(N=9)*
Subjects reporting ≥1 adverse event, %	22	11	0	11	33

Adverse events reported by TNX-201 subjects all rated as "mild" and most are not study drug-related
No subject discontinued due to treatment-emergent adverse events
Dose-related increase in TNX-201 plasma levels (C_{max}, AUC)
No evidence of isomer interconversion

Results support the advancement of TNX-201 into Phase 2 development

TNX-201 ((R)-isometheptene mucate) is an Investigational New Drug and is not approved for any indication.

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The imidazoline-1 receptor (I_1-R) is a novel target for the treatment of pain

Characteristics

- Transmembrane receptor
- Distinct from α_2AR and MAO receptor subtypes
- No sequence similarity to GPCRs or ATP-sensitive K+ channels
- Shares similarities to ryanodine and cytokine receptors

Hot Plate Test

Mouse studies

- I_1-R null mice show **no difference** in systolic blood pressure or heart rate compared to wild type
- I_1-R null mice show a **reduction in pain threshold** compared to wild type in both the hot plate and tail flick tests

Piletz JE et al. DNA Cell Biol 2000; 19:319-329.
Zhang L et al. CNS Neurosci Ther 2013;19:978-981.

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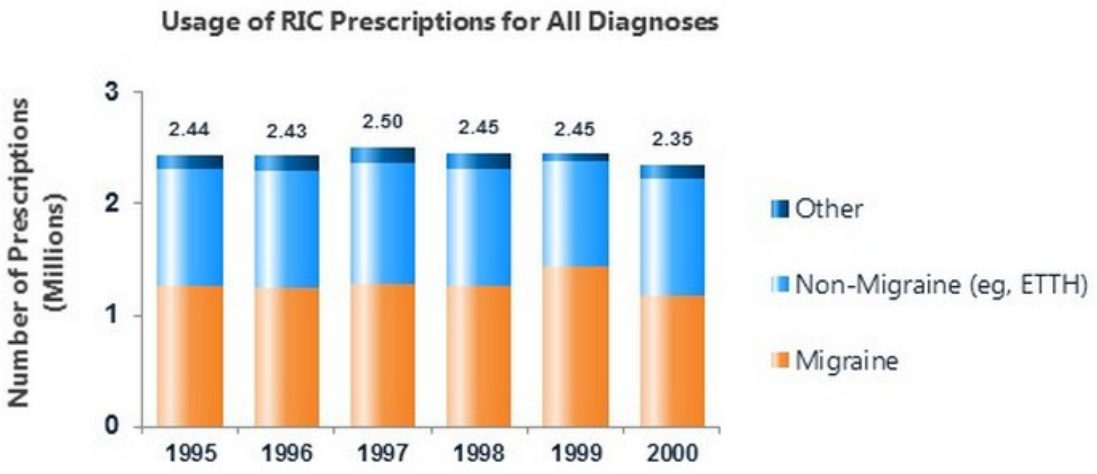
Racemic isometheptene combination (RIC) prescriptions had been commonly written

Number of RIC prescriptions peaked at 2.5 million

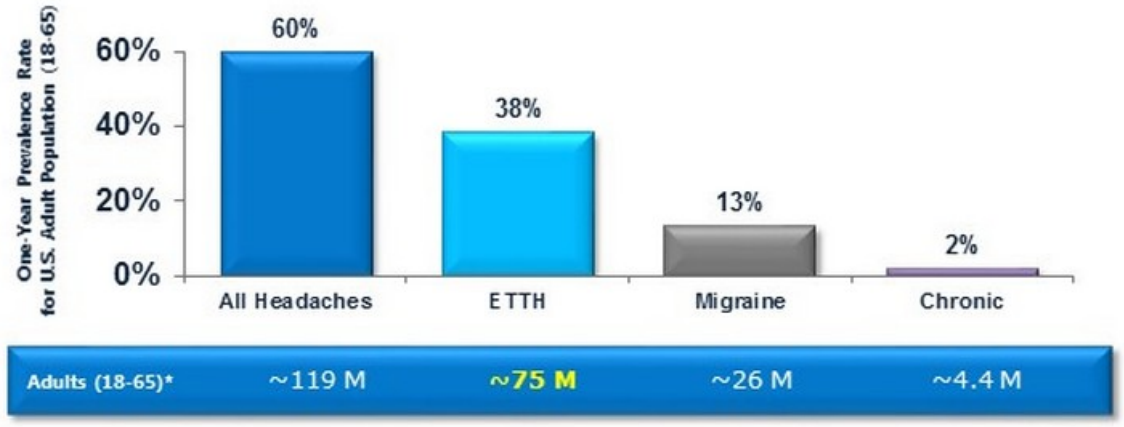


Source: IMS Health, National Prescription Audit, 01/1995 – 12/2000 (extracted 8/2014);
IMS Health, IMS National Disease and Therapeutic Index™, 01/1995 – 12/2000 (extracted 8/2014).

TONIX PHARMACEUTICALS

ETTH is the most common type of headache

30% of U.S. adults experience frequent ETTH



Episodic tension-type headaches account for approximately:

- 63% of all headaches
- 80% of all non-migraine headaches
  - "non-migraine" consists primarily of ETTH; >70% female

** Estimated from 2013 U.S. Census*
Schwartz et al., JAMA 1998;279:381-383; Stovner et al. Cephalalgia 2007;27(3):193-210.
Frequent ETTH = one to 15 headaches per month over a three-month period

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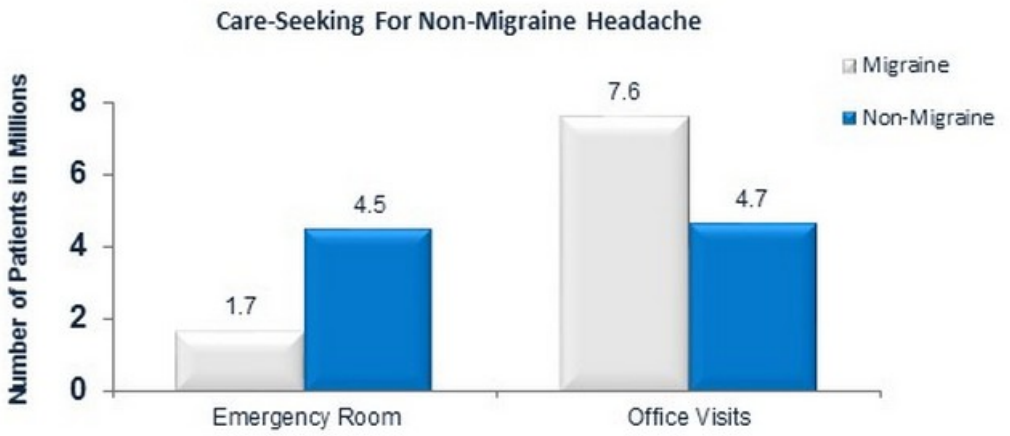
Patients with ETTH seek medical attention

Non-migraine headaches lead to 9.2 million emergency room or office visits each year



Heath Care Utilization Project data, 2011; IMS National Disease and Therapeutic Index™ 2013

TONIX PHARMACEUTICALS

Intellectual property

All IP wholly-owned by Tonix without obligations to others

TNX-102 SL
Fibromyalgia, PTSD

Composition-of-matter (eutectic)
- Patents filed
- Protection expected to 2034

Pharmacokinetics (PK)
- Patents filed
- Protection expected to 2033

Method-of-use
- Fibromyalgia: patents issued, 3Q 2020 expiry
- PTSD: patents filed

TNX-201
Headache

Composition-of-matter (isomer)
- Patents filed
- Protection expected to 2033

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TONIX PHARMACEUTICALS

Financial summary

NASDAQ: TNXP

Cash reported at December 31, 2014	$ 38.2 million
Net proceeds from common stock offering in 1Q15	$ 29.0 million
Shares outstanding (Feb 27, 2015)	16.1 million

TONIX PHARMACEUTICALS

Management team

Seth Lederman, MD
Chief Executive Officer

Leland Gershell, MD, PhD
Chief Financial Officer

Bruce Daugherty, PhD
Chief Scientific Officer

Milestones – recent and upcoming

TNX-102 SL – Fibromyalgia

- ☑ September 2014 – Reported top line results from Phase 2b BESTFIT study
- ☑ January 2015 – Reported FDA acceptance of 30% responder analysis as Phase 3 primary endpoint
- ☐ 2Q 2015 – Begin Phase 3 AFFIRM study
- ☐ 2H 2016 – Report top-line results from AFFIRM study

TNX-102 SL – Post-Traumatic Stress Disorder

- ☑ December 2014 – Began recruiting Phase 2 AtEase study in military-related PTSD
- ☐ 1H 2015 – Provide update on enrollment and timing of results from AtEase
- ☐ 1H 2016 – Report top-line results from AtEase study

TNX-201 – Episodic Tension-Type Headache

- ☑ December 2014 – Completed Phase 1 clinical pharmacology study
- ☐ 2Q 2015 – Begin Phase 2 study in ETTH
- ☐ 4Q 2015 – Report top-line results from Phase 2 study

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TONIX PHARMACEUTICALS

NASDAQ: TNXP

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