FORM	4
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN 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

(Print or Type Responses)											
1. Name and Address of Reporting Person [*] – Rhodes John B		2. Issuer Name and Conix Pharmaceu		-	•	TNXP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner				
(Last) (First) C/O TONIX PHARMACEUTICALS I CORP., 509 MADISON AVENUE, SU	HOLDING 0	. Date of Earliest Tra 5/06/2019	unsaction (M	onth/	Day/Year)	Officer (give title below)Oth	er (specify below	w)		
(Street) NEW YORK, NY 10022	4.	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) (State)	(Zip)	Table I - Non-Derivative Securities Acqu						uired, Disposed of, or Beneficially Owned			
	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Instr. 8) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		

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

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 control number.

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

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numb	er	6. Date Exercisab	ole and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of Deriva	ative	Expiration Date		of Underlyin	ng	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securitie	s	(Month/Day/Year	r)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Acquired				(Instr. 3 and	4)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Dispos	sed							2	(Instr. 4)
	Security					of (D)							0	Direct (D)	
						(Instr. 3,	4,						1	or Indirect	
						and 5)							Transaction(s)		
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration		or				
								Exercisable	Date	Title	Number				
				a 1	* *	(1)					of				
				Code	V	(A)	(D)				Shares				
Stock	•••	0.5/0.6/0.10						(1)	0.5.10.6.10.000	Common		(1)			
Option	\$ 2.05	05/06/2019		А		45,000		05/06/2020 <mark>(1)</mark>	05/06/2029	Stock	45,000	<u>(1)</u>	45,000	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Rhodes John B C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 1608 NEW YORK, NY 10022	Х						

Signatures

/s/ Jessica Morris, Attorney-in-Fact	05/08/2019
-**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) The option was granted pursuant to the Issuer's 2019 Stock Incentive Plan.

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.