

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	se 0.5			

INITIAL STATEMENT OF 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)								
Name and Address of Reporting Person * Goodman Daniel Wintner	2. Date of Event Requiring Statement (Month/Day/Year) 05/06/2019			3. Issuer Name and Ticker or Trading Symbol Tonix Pharmaceuticals Holding Corp. [TNXP]				
(Last) (First) (Middle) C/O TONIX PHARMACEUTICALS HOLDING CORP., 509 MADISON AVE, SUITE 1608			Iss	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)	
NEW YORK, NY 10022			belo	ow)	below)		Applicable Line _X_ Form filed	al or Joint/Group Filing(Check e) I by One Reporting Person by More than One Reporting Person
(City) (State) (Zip)			Table I - N	lon-Deriva	tive Securities	Benef	icially Ow	ned
1. Title of Security (Instr. 4)		Beneficially Owned (Instr. 4) Form (D) (I)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, \$0.001 par value		7 D						
Reminder: Report on a separate line for each class Persons who respounless the form dis Table II - Derivati	nd to the co plays a curr	ollection of in rently valid O	formation c	ontained in number.				SEC 1473 (7-02)
(Instr. 4) Exp	Date Exercisab piration Date nth/Day/Year)	ole and	3. Title and A Securities U: Derivative S (Instr. 4)	nderlying	or Exercise Price of Derivative			Beneficial Ownership (Instr. 5)
Dat Exe	e ercisable	Expiration Date	Title	Amount or Number of Shares	Security	Inc	Direct (D) or indirect (I) Instr. 5)	
Stock Option 05/	/06/2020 <mark>(1)</mark>	05/06/2029	Common Stock	30,000	\$ 2.05		D	
Stock Option 06	/17/2015 ⁽²⁾	06/17/2024	Common Stock	50	\$ 987		D	
Reporting Owners			Relation	iships				

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
Goodman Daniel Wintner C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVE, SUITE 1608 NEW YORK, NY 10022	X				

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 5(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 on May 6, 2019 pursuant to the Issuer's 2019 Equity Incentive Plan.

(2) The option was granted on June 17, 2014 pursuant to the Issuer's 2014 Equity 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.