## FORM 4

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

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre per reenonee	0.5

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

#### 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

1. Name and Address of Reporting Person* LANDRY DONALD W			2. Issuer Name and Ticker or Trading Symbol Tonix Pharmaceuticals Holding Corp. [TNXP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner							
(Last) (First) (Middle) C/O TONIX PHARMACEUTICALS HOLDING CORP, 509 MADISON AVE., STE 1608				3. Date of Earliest Transaction (Month/Day/Year) 05/06/2019							Officer (give	title below)	Other	(specify below	)		
NEW YORK, NY 10022			4. If At	4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ F	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							Acquired,	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye.		Execution Date, if Co (In (Month/Day/Year)		Coc (Ins	Fransacti de str. 8)	(A (I	A) or D	ties Acqui isposed of 4 and 5) (A) or (D)	(D) Owner Trans	5. Amount of Securities I Owned Following Report Transaction(s) (Instr. 3 and 4)		G F I C	Ownership form:	Beneficial Ownership			
Reminder:	Report on a s	eparate line for each	class of securities l	eneficia	lly ow	ned dire	ctly		-	s who	respond	to the coll	ection of	informatic	n contained	SEC	1474 (9-02)
Reminder:	Report on a s	reparate line for each		I - Deriv	vative S	Securiti	es A	P ir a cquired	ersons this for currer	orm arntly va	re not rec lid OMB or Benefic	uired to re control nu	espond u mber.		on contained orm display		1474 (9-02)
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1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table I  3A. Deemed Execution Date, if	I - Deriv (e.g., ) 4. Transac Code	vative S puts, c stion o S S O O O O O O O O O O O O O O O O O	Securiti calls, wa	es A rran er ative s (A)	cquired ats, option 6. Date Expirat (Month	rersons this for currer d, Dispo	orm are ntly va	re not rec lid OMB or Benefic le securiti	uired to re control nu	espond umber.  d Amount ing	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	To 10. Ownersl Form of Derivati Security Direct (I or Indirect) (I)	11. Naturof Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table I  3A. Deemed Execution Date, if any	I - Deriv (e.g., ) 4. Transac Code	vative S puts, c stion o S S O O O O O O O O O O O O O O O O O	Securiticalls, was a construction of Deriva Securities Acquired or Disposition of (D) Instr. 3, and 5)	es A rran er ative s (A)	cquired ats, option 6. Date Expirat (Month	dersons this for currer l, Dispo ons, con Exercistion Dat h/Day/Y	orm artily va	re not rec lid OMB or Benefic le securiti d	cially Owners  7. Title and of Underly Securities	espond umber.  d Amount ing	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported	T 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Nature of Indire Benefici Owners! (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LANDRY DONALD W C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVE., STE 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 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.