FORM 4

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

OMB APPROVAL					
OMB Number:	3235-028				
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hours par respons	0				

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

(Print or Ty	pe Response	s)													
1. Name and Address of Reporting Person * MORRIS JESSICA EDGAR				2. Issuer Name and Ticker or Trading Symbol Tonix Pharmaceuticals Holding Corp. [TNXP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
	NIX PHAR	(First) RMACEUTICAL SON AVENUE,		3. Date of Earliest Transaction (Month/Day/Year) 05/06/2019					X	X Officer (give title below) Other (specify below) Chief Operating Officer					
NEW YO	ORK, NY	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ F	6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(Cit	ty)	(State)	(Zip)				Tab	le I - Non-Deri	vative Securities	Acquired,	Disposed o	f, or Benefi	cially Owned		
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yes	Execution any		ned n Date, if Day/Year)	Coo (Ins	de (Astr. 8) (I	Securities Acqui A) or Disposed of astr. 3, 4 and 5) (A) or mount (D)	(D) Own Trans		curities Ben gg Reported	C F C o	wnership orm: irect (D) Indirect (. Nature f Indirect Beneficial Ownership Instr. 4)
			Table I					in this for a currer cquired, Dispos	who respond orm are not rec tly valid OMB sed of, or Benefic vertible securiti	quired to r control nu cially Own	espond ui mber.				474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	*****	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	etion 3)	5. Numb	erivative rities (Month/Day/Year) of Se (Insposed 1) r. 3, 4,		7. Title an of Underly Securities (Instr. 3 an	ring	Derivative Security (Instr. 5) Benefici Owned Followir Reportee Transact		Ownership of Indirect (D) or Indirect (Instr. 4) of Indirect (Instr. 4)	Beneficia Ownershi (Instr. 4)	
								D.	n		Amount		(Instr. 4)	(Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Number of Shares				
Stock Option	\$ 2.05	05/06/2019		Code		(A) 28,835	(D)	Exercisable		G	of Shares	\$ 0 (2)	28,835	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
MORRIS JESSICA EDGAR C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVENUE, SUITE 1608 NEW YORK, NY 10022			Chief Operating Officer			

Signatures

/s/ Jessica Morris	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 vests 1/3rd on the first anniversary of issuance and 1/36th each month thereafter for 24 months.
- (2) 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.