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

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

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response... 0.5

### 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 Response	s)										
1. Name and Address o MORRIS JESSICA	1	2. Issuer Name and Fonix Pharmaceu		- C		ΓNXP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) C/O TONIX PHAR CORP, 509 MADI	HOLDING (	. Date of Earliest Tra 02/25/2020	unsaction (M	onth/	Day/Year	)	X_Officer (give title below) Other (specify below) Chief Operating Officer				
NEW YORK, NY	4	. If Amendment, Dat	e Original F	iled(N	1onth/Day/Y	ear)	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 - No	on-De	ired, Disposed of, or Beneficially Owne	d of, or Beneficially Owned				
1. Title of Security (Instr. 3)	5		Execution Date, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D) or Indirect (I)	Beneficial Ownership
				Code	V	Amount	(D)	Price		(Instr. 4)	

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 SEC 1474 (9-02) 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)														
	Conversion	Date (Month/Day/Year)		Code	tion )	5. Number 6. Date Exercisable and of Derivative Expiration Date Exercisable and of Derivative (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				7. Title and of Underlyin Securities (Instr. 3 and	ıg	Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option	\$ 0.4	02/25/2020		А		24,000		02/25/2021(1)	02/25/2030	Common Stock	24,000	\$ 0 ( <u>2</u> )	24,000	D	
Stock Option	\$ 0.5	02/25/2020		А		24,000		02/25/2021 <sup>(1)</sup>	02/25/2030	Common Stock	24,000	\$ 0 <u>(2)</u>	24,000	D	

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	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 02/27/2020 Date Signature of Reporting Person

# **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 2020 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.

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