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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average b	ourden
hours per response	0.5

(Instr. 4)

120,000

120,000

Amount

of Shares

120,000

120,000

\$ 0 (2)

\$ 0 (2)

Expiration

02/25/2030

Title

Common

Stock

Common

Stock

(Instr. 4)

D

D

longer subject to Section 16. Form 4 or Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may 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 *- LEDERMAN SETH			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 Director 10% Owner							
(Last) (First) (Middle) C/O TONIX PHARMACEUTICALS HOLDING CORP, 509 MADISON AVE., SUITE 1608				3. Date of Earliest Transaction (Month/Day/Year) 02/25/2020						X Officer (give title below) Other (specify below) Chief Executive Officer						
(Street) NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(Cit	ty)	(State)	(Zip)			Table	I - Non	-De	rivative	Securitie	s Acq	uired, Disposed of	, or Benefic	ially Owned		
1.Title of S (Instr. 3) Reminder:		separate line for each	2. Transaction Date (Month/Day/Ye	any (Month	on Date, if /Day/Year)	Code (Instr.	de V	v .	(A) or Di (Instr. 3, Amount	(A) or (D)	f (D) Price	5. Amount of Sec Owned Following Transaction(s) (Instr. 3 and 4)	Reported	contained	Ownership Form: Direct (D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Table		ive Securitie		uired, D	Disp	osed of,	or Benef	icially	I number. Owned				
Security	Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	4. Transaction Code (Instr. 8)	5. Number	of 6 E (I		xerc n Da	isable an		7. T of U Seco	itle and Amount Inderlying urities tr. 3 and 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Ownersl Form of Derivati Security Direct (I or Indire	Benefic Owners (Instr. 4

Exercisable

02/25/2021(1)

02/25/2021(1) 02/25/2030

Reporting Owners

\$ 0.4

\$ 0.5

02/25/2020

02/25/2020

Stock

Stock

Option

Option

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LEDERMAN SETH C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVE., SUITE 1608 NEW YORK, NY 10022	X		Chief Executive Officer			

Code

Α

A

(A)

120,000

120,000

Signatures

/s/ Seth Lederman	02/27/2020
**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.
- (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.

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.	