FORM 4

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

OMB APPROV	AL
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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).

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

	pe Response	,													
1. Name and Address of Reporting Person *- Rhodes John B				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 AVENUE, SUITE 1608				3. Date of Earliest Transaction (Month/Day/Year) 05/04/2020					0	officer (give t	itle below)	Other	(specify below	v)	
NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ For	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, D	lired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	Execu ar) any	Deemed ution Date, in th/Day/Year	(In:	str. 8)	(A) (Ins	Securities Acquing or Disposed of str. 3, 4 and 5) (A) or nount (D)	(D) Owned Transa		curities Ben g Reported	, I (Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	Report on a	separate line for each	h class of securities b	eneficial	ly owned dir	ectly	Pe	rsons v	who respond						1474 (9-02)
Reminder:	Report on a s	separate line for each		I - Deriva	ative Securi	ties A	Per in to a concept the concep	rsons v this for current	rm are not req ly valid OMB o	uired to rescontrol nun	spond ur nber.				1474 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	I - Deriva (e.g., p 4. Transacti Code	stive Securive Securition of Derive Securiti	ties A arran per vative es d (A) osed	Perint a conception of a conce	rsons withis for this for the current of the curren	rm are not req ly valid OMB of ed of, or Benefic vertible securition ble and	uired to rescontrol nun	Amount	8. Price of		To 10. Owners Form of Derivati Security Direct (or Indire	11. Naturinip of Indire Benefici Ownersk : (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	I - Deriva (e.g., p 4. Transacti Code	stive Securitions, calls, we securition Acquire or Disposor of (D) (Instr. 3	ties A arran per vative es d (A) osed	Perint a conception of a conce	rsons vithis for this for the current. Dispose as, converge conve	rm are not req ly valid OMB of ed of, or Benefic vertible securition ble and	cially Owned es) 7. Title and of Underlyic Securities	Amount	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	To 10. Owners Form of Derivati Security Direct (or Indire	11. Nature of Indire Benefici Owners! (Instr. 4

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Rhodes John B C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 1608 NEW YORK, NY 10022	X				

Signatures

/s/ Jessica Morris, Attorney-in-Fact	05/06/2020
**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. 78ff(a)
- (1) The option was granted pursuant to the Issuer's Amended and Restated 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.