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

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of report (date of earliest event reported): August 21, 2023

TONIX PHARMACEUTICALS HOLDING CORP.

(Exact name of registrant as specified in its charter)

Nevada	**001-36019**	**26-1434750**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

26 Main Street, Chatham, New Jersey 07928
(Address of principal executive offices) (Zip Code)

Registrant's telephone number, including area code: (862) 904-8182

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	**Trading Symbol(s)**	**Name of each exchange on which registered**
Common Stock	TNXP	The NASDAQ Capital Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 7.01 Regulation FD Disclosure.

On August 21, 2023, Tonix Pharmaceuticals Holding Corp. (the "Company") announced that it received an official written response from a Type B pre-Investigational New Drug Application ("IND") meeting with the U.S. Food and Drug Administration ("FDA") to develop its TNX-801 (recombinant horsepox virus, live vaccine) vaccine candidate to protect against mpox disease and smallpox. A copy of the press release which discusses this matter is furnished hereto as Exhibit 99.01, and incorporated herein by reference.

The Company updated its investor presentation, which is used to conduct meetings with investors, stockholders and analysts and at investor conferences, and which the Company intends to place on its website, which may contain nonpublic information. A copy of the presentation is filed as Exhibit 99.02 hereto and incorporated herein by reference.

The information in this Item 7.01 of this Current Report on Form 8-K, including Exhibits 99.01 and 99.02 attached hereto, shall not be deemed "filed" for purposes of Section 18 of the United States Securities Exchange Act of 1934 (the "Exchange Act") or otherwise subject to the liabilities of that section, nor shall they be deemed incorporated by reference in any filing under the United States Securities Act of 1933 or the Exchange Act, except as shall be expressly set forth by specific reference in such a filing.

Item 8.01. Other Events.

On August 21, 2023, the Company announced that it received an official written response from a Type B pre-IND meeting with the FDA to develop TNX-801 as a vaccine to protect against mpox disease and smallpox. The Company believes the FDA feedback provides a path to agreement on the design of a Phase 1/2 study and the overall clinical development plan for TNX-801. The Phase 1/2 clinical trial will assess the safety, tolerability, and immunogenicity of TNX-801, following the submission and clearance of an IND.

Forward- Looking Statements

This Current Report on Form 8-K contains certain forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the

Securities Exchange Act of 1934 and Private Securities Litigation Reform Act, as amended, including those relating to the Company's product development, clinical trials, clinical and regulatory timelines, market opportunity, competitive position, possible or assumed future results of operations, business strategies, potential growth opportunities and other statement that are predictive in nature. These forward-looking statements are based on current expectations, estimates, forecasts and projections about the industry and markets in which we operate and management's current beliefs and assumptions.

These statements may be identified by the use of forward-looking expressions, including, but not limited to, "expect," "anticipate," "intend," "plan," "believe," "estimate," "potential," "predict," "project," "should," "would" and similar expressions and the negatives of those terms. These statements relate to future events or our financial performance and involve known and unknown risks, uncertainties, and other factors which may cause actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. Such factors include those set forth in the Company's filings with the SEC. Prospective investors are cautioned not to place undue reliance on such forward-looking statements, which speak only as of the date of this press release. The Company undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events or otherwise.

Item 9.01 Financial Statements and Exhibits.

(d)

Exhibit No.	Description.
99.01	Press Release of the Company, dated August 21, 2023
99.02	Corporate Presentation by the Company for August 2023
104	Cover Page Interactive Data File (embedded within the Inline XBRL document)

SIGNATURE

Pursuant to the requirement of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

TONIX PHARMACEUTICALS HOLDING CORP.

Date: August 21, 2023

By: /s/ Bradley Saenger
Bradley Saenger
Chief Financial Officer

Exhibit 99.01

Tonix Pharmaceuticals Announces Results of Pre-IND Meeting with FDA for TNX-801 as a Potential Vaccine to Prevent Mpox and Smallpox

Phase 1/2 Clinical Trial of TNX-801 for the Prevention of Mpox and Smallpox to Commence Following Submission of an IND

TNX-801 is Based on a Proprietary Live Virus Vaccine Platform Designed to Stimulate Durable T-Cell Immunity

TNX-801 Vaccination Protected Animals from a Lethal Challenge with Monkeypox in Preclinical Testing

CHATHAM, N.J., August 21, 2023 (GLOBE NEWSWIRE) – Tonix Pharmaceuticals Holding Corp. (Nasdaq: TNXP) (Tonix or the Company), a biopharmaceutical company with marketed products and a pipeline of development candidates, today announced that it received the official written response from a Type B pre-Investigational New Drug Application (IND) meeting with the U.S. Food and Drug Administration (FDA) to develop TNX-801[1] (recombinant horsepox virus, live vaccine) as a potential vaccine to protect against mpox disease (formerly known as monkeypox) and smallpox. Tonix believes the FDA feedback provides a path to agreement on the design of a Phase 1/2 study and the overall clinical development plan. The Phase 1/2 clinical trial will assess the safety, tolerability, and immunogenicity of TNX-801, following the submission and clearance of an IND.

"The FDA's response to the pre-IND meeting marks an important milestone in the development of TNX-801 since we have FDA concurrence on the proposed manufacturing, toxicology studies, and the Phase 1/2 clinical design," said Seth Lederman, M.D., President and Chief Executive Officer of Tonix. "TNX-801 is believed to be closely related to Edward Jenner's original smallpox vaccine.[2-10] Jenner's live virus smallpox vaccine – the first vaccine - remains one of the most effective vaccines in history, since it typically provided lifetime immunity with a single dose, prevented forward transmission of the smallpox virus, and ultimately eradicated the disease. TNX-801 has an attenuated phenotype relative to modern vaccinia viruses, which comprise a group of vaccine viruses that evolved from Jenner's vaccine during passage in man and animals for over 100 years. When live virus vaccinia vaccination was routinely practiced in Africa, mpox was kept out of the human population."[2,11]

TNX-801 is a live replicating attenuated vaccine based on horsepox that is believed to protect against smallpox and mpox, primarily by eliciting a T-cell response evidenced by the "take". The "take" is a functional measure of protective T-cell immunity validated by the eradication of smallpox. TNX-801 is administered with a single dose, can be readily scaled up for manufacturing using proven technology and can be distributed and stored without requiring a costly and cumbersome ultra-cold supply chain. Live replicating vaccines have the potential to induce durable T-cell immunity, prevent serious illness after infection and block forward transmission. Tonix reported positive preclinical efficacy data, demonstrating that TNX-801 vaccination protected non-human primates against lethal challenge with mpox.[12]

"More than 30,000 people have contracted mpox in the U.S. so far during the 2022-23 epidemic," [13] said Dr. Zeil Rosenberg, Executive Vice President, Medical at Tonix. "The recent cluster of mpox in Chicago revealed breakthrough cases of mpox in individuals who had been vaccinated with the currently authorized non-replicating vaccine, which is administered in two doses.[14] In contrast, TNX-801 is delivered intradermally with only one dose and therefore may achieve higher rates of community protection by eliminating drop-out between doses and limiting forward transmission. Moreover, relying on only one approved mpox vaccine at present is a risk for the global supply chain that has already led to insufficient availability of vaccine to meet global health needs, especially in Africa."

Dr. Rosenberg added, "We believe TNX-801 could make a global impact on mpox and the risk of smallpox because of its potential durable T-cell immune response, the ability to manufacture at scale, to use a lower dose than non-replicating vaccines. The current formulation is a frozen liquid, but we believe that future lyophilized versions can be stored and shipped at standard refrigeration. Moreover, we believe the low dose of TNX-801 makes this technology amenable for future implementation in microneedle delivery systems."

Dr. Lederman concluded, "In addition to its potential use as a vaccine, TNX-801 also has the potential as a viral vector platform, for which versions can be developed to protect against a host of infectious diseases beyond smallpox and mpox, including COVID-19. In light of the recent resurgence in COVID cases across the country with the new EG.5 "Eris" variant, we believe that the horsepox recombinant pox virus platform may provide next generation vaccines to prevent future outbreaks."

About TNX-801*

TNX-801 is a live virus vaccine based on horsepox [2,11]. Horsepox and vaccinia are closely related orthopoxviruses that are believed to share a common ancestor. TNX-801 is believed to be more closely related to Jenner's vaccinia vaccine than modern vaccinia vaccines, which appear to have evolved by deletions and mutations to a phenotype of larger plaque size in tissue culture and greater virulence in mice. Molecular analysis shows that horsepox is closer than modern vaccinia vaccines in DNA sequence to the vaccine discovered and disseminated by Dr. Edward Jenner.[2-10] Vaccine genome researchers have recently shown the contemporaneous use of horsepox and horsepox-related viruses in the United States as smallpox vaccines in the 1860's[9,10]. Additionally they found a remarkable degree of identity with the circa 1860 U.S. smallpox vaccine VK05 and the 1976 Mongolian horsepox isolate called MNR-76, upon which Tonix's TNX-801 is based.[3,5] These recent discoveries are further steps in establishing that what is called 'horsepox' today was used to vaccinate against smallpox in the 19th century. Dr. Edward Jenner invented vaccination in 1798 and the procedure was

called “vaccination” because the inoculum material was initially obtained from lesions on the udders of cows affected by a mild disease known as cowpox[2]. ‘Cow’ is ‘vacca’ in Latin. However, Dr. Jenner suspected that cowpox originated from horsepox. [2] Subsequently, Dr. Jenner and others immunized against smallpox using material directly obtained from horses. The use of vaccines from horses was sometimes called ‘equination’ from the Latin ‘equus’ which means ‘horse’. Equination and vaccination were practiced side-by-side in Europe[6]. The small plaque size in culture of TNX-801 appears identical to the U.S. Centers for Disease Control publication of the natural isolate[12]. Relative to vaccinia, horsepox has substantially decreased virulence in mice[3]. Tonix’s TNX-801 vaccine candidate is administered intradermally. The major cutaneous reaction or “take” to vaccinia vaccine was described by Dr. Edward Jenner in 1796 and has been used since then as a biomarker for protective immunity to smallpox, including in the World Health Organization’s (WHO) accelerated smallpox eradication program that successfully eradicated smallpox in the 1960’s.

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1. TNX-801 is in the pre-IND stage and has not been approved for any indication.

2. Jenner E. “An Inquiry Into the Causes and Effects of the Variole Vaccinae, a Disease Discovered in Some of the Western Counties of England, Particularly Gloucestershire and Known by the Name of the cow-pox.” London: Sampson Low, 1798.
3. Noyce RS, et al. (2018) *PLoS One*. 13(1):e0188453
4. Schrick L, et al. (2017) *N Engl J Med* 377:1491-1492
5. Tulman ER, et al. (2006) J Virol. 80(18):9244-58.
6. Esparza J, et al. (2017) *Vaccine*. 35(52):7222-7230.
7. Esparza J, et al. (2020) *Vaccine*. 38(30):4773-4779.
8. Qin L, et al. (2015) *J Virol*. 89(3):1809-24.
9. Brinkmann A, et al, (2020) *Genome Biology* 21:286
10. Duggan A, et al. (2020) *Genome Biology* 21:175 https://doi.org/10.1186/s13059-020-02079-z
11. Noyce RS, et al., (2023) *Viruses.* 15(2):356.
12. Trindade GS, et al. (2016) *Viruses.* 8(12):328.
13. McQuiston JH, et al. (2023) The CDC Domestic Mpox Response — United States, 2022–2023. *MMWR Morb Mortal Wkly Rep.* 72(20):547–552
14. Faherty EAG, et al.(2023) Emergence of an mpox cluster primarily affecting persons previously vaccinated against mpox-Chicago, Illinois, March 18-June 12, 2023. *MMWR Morb Mortal Wkly Rep.* , 72(25);696-698.

Tonix Pharmaceuticals Holding Corp.*

Tonix is a biopharmaceutical company focused on commercializing, developing, discovering and licensing therapeutics to treat and prevent human disease and alleviate suffering. Tonix Medicines, our commercial subsidiary markets Zembrace® SymTouch® (sumatriptan injection) 3 mg and Tosymra® (sumatriptan nasal spray) 10 mg under a transition services agreement with Upsher-Smith Laboratories from whom the products were acquired on June 30, 2023. Zembrace SymTouch and Tosymra are each indicated for the treatment of acute migraine with or without aura in adults. Tonix’s development portfolio is composed of central nervous system (CNS), rare disease, immunology and infectious disease product candidates. Tonix’s CNS development portfolio includes both small molecules and biologics to treat pain, neurologic, psychiatric and addiction conditions. Tonix’s lead development CNS candidate, TNX-102 SL (cyclobenzaprine HCl sublingual tablet), is in mid-Phase 3 development for the management of fibromyalgia, having completed enrollment of a potentially confirmatory Phase 3 study in the third quarter of 2023, with topline data expected in the fourth quarter of 2023. TNX-102 SL is also being developed to treat fibromyalgia-type Long COVID, a chronic post-acute COVID-19 condition. Enrollment in a Phase 2 proof-of-concept study has been completed, and topline results are expected in the third quarter of 2023. TNX-601 ER (tianeptine hemioxalate extended-release tablets) is a once-daily oral formulation being developed as a treatment for major depressive disorder (MDD), that completed enrollment in a Phase 2 proof-of-concept study in the third quarter of 2023, with topline results expected in the fourth quarter of 2023. TNX-4300 (estianeptine) is a single isomer version of TNX-601, small molecule oral therapeutic in preclinical development to treat MDD, Alzheimer’s disease and Parkinson’s disease. Relative to tianeptine, estianeptine lacks activity on the μ-opioid receptor while maintaining activity in the rat Novel Object Recognition test *in vivo* and the ability to activate PPAR-β/δ and neuroplasticity in tissue culture. TNX-1900 (intranasal potentiated oxytocin), is in development for preventing headaches in chronic migraine, and has completed enrollment in a Phase 2 proof-of-concept study with topline data expected in the fourth quarter of 2023. TNX-1900 is also being studied in binge eating disorder, pediatric obesity and social anxiety disorder by academic collaborators under investigator-initiated INDs. TNX-1300 (cocaine esterase) is a biologic designed to treat cocaine intoxication and has been granted Breakthrough Therapy designation by the FDA. A Phase 2 study of TNX-1300 is expected to be initiated in the third quarter of 2023. Tonix’s rare disease development portfolio includes TNX-2900 (intranasal potentiated oxytocin) for the treatment of Prader-Willi syndrome. TNX-2900 has been granted Orphan Drug designation by the FDA. Tonix’s immunology development portfolio includes biologics to address organ transplant rejection, autoimmunity and cancer, including TNX-1500, which is a humanized monoclonal antibody targeting CD40-ligand (CD40L or CD154) being developed for the prevention of allograft rejection and for the treatment of autoimmune diseases. A Phase 1 study of TNX-1500 was initiated in the third quarter of 2023. Tonix’s infectious disease pipeline includes TNX-801, a vaccine in development to prevent smallpox and mpox. TNX-801 also serves as the live virus vaccine platform or recombinant pox vaccine platform for other infectious diseases. The infectious disease development portfolio also includes TNX-3900 and TNX-4000, which are classes of broad-spectrum small molecule oral antivirals.

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*Tonix’s product development candidates are investigational new drugs or biologics and have not been approved for any indication.

This press release and further information about Tonix can be found at www.tonixpharma.com.

Forward Looking Statements

Certain statements in this press release are forward-looking within the meaning of the Private Securities Litigation Reform Act of 1995. These statements may be identified by the use of forward-looking words such as “anticipate,” “believe,” “forecast,” “estimate,” “expect,” and “intend,” among others. These forward-looking statements are based on Tonix's current expectations and actual results could differ materially. There are a number of factors that could cause actual events to differ materially from those indicated by such forward-looking statements. These factors include, but are not limited to, risks related to the failure to obtain FDA clearances or approvals and noncompliance with FDA regulations; risks related to the failure to successfully market any of our products; risks related to the timing and progress of clinical development of our product candidates; our need for additional financing; uncertainties of patent protection and litigation; uncertainties of government or third party payor reimbursement; limited research and development efforts and dependence upon third parties; and substantial competition. As with any pharmaceutical under development, there are significant risks in the development, regulatory approval and commercialization of new products. Tonix does not undertake an obligation to update or revise any forward-looking statement. Investors should read the risk factors set forth in the Annual Report on Form 10-K for the year ended December 31, 2022, as filed with the Securities and Exchange Commission (the “SEC”) on March 13, 2023, and periodic reports filed with the SEC on or after the date thereof. All of Tonix's forward-looking statements are expressly qualified by all such risk factors and other cautionary statements. The information set forth herein speaks only as of the date thereof.

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Exhibit 99.02

Cautionary Note on Forward-Looking Statements

Certain statements in this presentation regarding strategic plans, expectations and objectives for future operations or results are "forward-looking statements" as defined by the Private Securities Litigation Reform Act of 1995. These statements may be identified by the use of forward-looking words such as "anticipate," "believe," "forecast," "estimate" and "intend," among others. These forward-looking statements are based on Tonix's current expectations and actual results could differ materially. There are a number of factors that could cause actual events to differ materially from those indicated by such forward-looking statements. These factors include, but are not limited to, the risks related to failure to obtain FDA clearances or approvals and noncompliance with FDA regulations; risks related to the failure to successfully market any of our products; risks related to the timing and progress of clinical development of our product candidates; our need for additional financing; uncertainties of patent protection and litigation; uncertainties of government or third party payor reimbursement; limited research and development efforts and dependence upon third parties; and substantial competition. As with any pharmaceutical under development, there are significant risks in the development, regulatory approval and commercialization of new products. The forward-looking statements in this presentation are made as of the date of this presentation, even if subsequently made available by Tonix on its website or otherwise. Tonix does not undertake an obligation to update or revise any forward-looking statement, except as required by law. Investors should read the risk factors set forth in the Annual Report on Form 10-K for the year ended December 31, 2022, as filed with the Securities and Exchange Commission (the "SEC") on March 13, 2023, and periodic reports and current reports filed with the SEC on or after the date thereof. All of Tonix's forward-looking statements are expressly qualified by all such risk factors and other cautionary statements.

Investment Highlights

MARKETED PRODUCTS

Tonix Medicines **markets two FDA-approved products** Zembrace® SymTouch® (sumatriptan injection) and Tosymra® (sumatriptan nasal spray) for the treatment of acute migraine in adults with or without aura

RICH PIPELINE OF THERAPEUTICS CANDIDATES IN DEVELOPMENT

Tonix's core focus is on **central nervous system** disorders, but we also target unmet needs across multiple therapeutic areas including **immunology, infectious disease** and **rare disease.**

IN-HOUSE CAPABILITIES

Internal **capabilities in R&D and biologics process development and GMP manufacturing** to accelerate development timelines.

STRATEGIC PARTNERSHIPS

Partnering strategically with other **biotech companies**, **world-class academic and non-profit research organizations** to bring innovative therapeutics to market faster.

[1]Zembrace SymTouch [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: February 2021 - For more information, talk to your provider and read the Patient Information and Instructions for Use. – Important Safety Information is provided in the appendix
[2]Tosymra [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: Feb 2021 .For more information, talk to your provider and read the Patient Information and Instructions for Use. – Important Safety Information is provided in the appendix
Tonix has contracted to acquire the Zembrace, SymTouch and Tosymra trademarks. Intravail is a registered trademark of Aegis Therapeutics, LLC, a wholly owned subsidiary of Neurelis, Inc.

TONIX PHARMACEUTICALS

Pipeline: Key Clinical Development Programs

Candidates*	Indication	Status/Next Milestone
TNX-102 SL[1]	Fibromyalgia (FM) Long COVID (PASC[2])	Mid-Phase 3 – enrollment complete Phase 2 – enrollment complete
TNX-1300[3]	Cocaine Intoxication - *FDA Breakthrough Designation*	Mid-Phase 2, Targeted 3Q 2023 Start
TNX-1900[4]	Prevention of Chronic Migraine	Phase 2 – enrollment complete[5]
TNX-601 ER	Depression	Phase 2 – enrollment complete[6]
TNX-2900[7]	Prader-Willi Syndrome - *FDA Orphan Drug Designation*	Phase 2 ready
TNX-1500[8]	Organ Transplant Rejection/ Autoimmune Conditions	Phase 1 – currently enrolling

**All of Tonix's product candidates are investigational new drugs or biologics and none has been approved for any indication.*
[1]TNX-102 SL (cyclobenzaprine HCl sublingual tablets) also has active INDs for Agitation in Alzheimer's Disease (AAD), Alcohol Use Disorder (AUD), and Posttraumatic Stress Disorder (PTSD). All indications are Phase 2 ready.
[2]Post-Acute Sequelae of COVID-19.
[3]TNX-1300 (double-mutant cocaine esterase) is licensed from Columbia University.
[4]Acquired from Trigemina; license agreement with Stanford University; Planned investigator-initiated Binge Eating Disorder (BED) study initiated 3Q 2023.
[5]A Phase 2 trial under an investigator-initiated IND has been completed in the U.S. using TNX-1900
[6]Phase 1 trial for formulation development was completed outside of the U.S.; Other potential indications include PTSD and neurocognitive dysfunction from steroids
[7]Co-exclusive license agreement with French National Institute of Health and Medical Research (Inserm)
[8]anti-CD40L humanized monoclonal antibody – IND cleared

TONIX PHARMACEUTICALS

Upcoming Expected Topline Results

Third Quarter 2023

Fourth Quarter 2023

TNX-102 SL for Long COVID

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

TNX-102 SL for Fibromyalgia

Topline Results

Phase 3 Potential NDA Enabling Study

Registration-Quality

TNX-1900 for Chronic Migraine

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

TNX-601 ER for Depression

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

TONIX PHARMACEUTICALS

Two Marketed Proprietary Migraine Drugs
Autoinjector and Nasal Spray (Non-oral) Formulations of Sumatriptan

Zembrace® SymTouch® (sumatriptan injection) 3 mg[1]

Tosymra® (sumatriptan nasal spray) 10 mg[2]

- Each indicated for the treatment of acute migraine with or without aura in adults
- Sumatriptan remains the acute migraine 'gold standard' treatment for many patients and continues to represent the largest segment of the market in terms of unit sales[3]
- Each may provide migraine pain relief in as few as 10 minutes for some patients[1,2,4,5]
- Each bypasses GI tract – provides convenient administration
- Patents to 2036 (Zembrace) and 2031 (Tosymra)

Consolidated Product Sales for the 12 months ended March 31st 2023

- Factory sales: $30.4M[3]
- Net sales: $16.4M[3]

Retail Product Sales for the 12 months ended December 31st 2022

- Retail sales: ~$23 M (Zembrace ~$19.6 M and Tosymra ~$3.5 M)[4]

Acquired from Upsher-Smith Laboratories which has managed care contracts covering ~200 M lives

- Contract includes a transition period during which Tonix expects to secure its own contracts

[1]Zembrace SymTouch [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: February 2021 - For more information, talk to your provider and read the Patient Information and Instructions for Use. – Important Safety Information is provided in the appendix
[2]Tosymra [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: Feb 2021 .For more information, talk to your provider and read the Patient Information and Instructions for Use. – Important Safety Information is provided in the appendix
[3]Upsher-Smith Laboratories, LLC: Data On File. 2023
[4]Mathew NT, et al. Dose ranging efficacy and safety of subcutaneous sumatriptan in the acute treatment of migraine. US Sumatriptan Research Group. Arch Neurol. 1992;49(12):1271-1276.
[5]Wendt J, et al. A randomized, double-blind, placebo-controlled trial of the efficacy and tolerability of a 4-mg dose of subcutaneous sumatriptan for the treatment of acute migraine attacks in adults. Clinical Therapeutics. 2006;28(4):517-526.
Tonix has contracted to acquire the Zembrace, SymTouch and Tosymra trademarks. Intravail is a registered trademark of Aegis Therapeutics, LLC, a wholly owned subsidiary of Neurelis, Inc.

Administration of Zembrace and Tosymra Bypass the GI Tract

Bypassing the gastrointestinal (GI) tract is a potential advantage for treating acute migraine

- Potential to provide a treatment option for migraines complicated by severe nausea and vomiting

Need for acute non-oral treatments

- GI absorption may be inconsistent in migraineurs due to gastric stasis (also called "gastroparesis")[1-4]
- Nausea and vomiting are symptoms of migraine[5]

Existing intranasal products

- Imitrex® nasal spray (sumatriptan)
- Migranal® (dihydroergotamine) nasal spray – developed by Novartis, sold by Bausch Health

New intranasal products bring attention to this non-oral route

- Pfizer's Zavzpret® (zavegepant), FDA approved in March, 2023[1] is the first intranasal gepant
- Impel NeuroPharma's Trudhesa® (dihydroergotamine) FDA approved 2021[2]
  - Precision Olfactory Delivery (POD) technology targets vascular-rich upper nasal space

[1]Pfizer Press Release March 10, 2023. – https://www.pfizer.com/news/press-release/press-release-detail/pfizers-zavzprettm-zavegepant-migraine-nasal-spray
[2]Impel Press Release September 3, 2021 - https://impelpharma.com/2021/09/03/impel-neuropharma-announces-u-s-fda-approval-of-trudhesa-dihydroergotamine-mesylate-nasal-spray-for-the-acute-treatment-of-migraine/

Upcoming Expected Topline Results

Third Quarter 2023

TNX-102 SL for Long COVID

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

Fourth Quarter 2023

TNX-102 SL for Fibromyalgia

Topline Results

Phase 3 Potential NDA Enabling Study

Registration-Quality

TNX-1900 for Chronic Migraine

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

TNX-601 ER for Depression

Topline Results

Phase 2 Proof-of-Concept Study

Registration-Quality

TONIX PHARMACEUTICALS

TNX-102 SL*

Cyclobenzaprine (Protectic®) Pipeline in a Product

A unique, sublingual formulation of cyclobenzaprine designed to optimize delivery and absorption

Potent binding and antagonist activities at the serotonergic-5-HT2A, adrenergic-α1, histaminergic-H1, and muscarinic-M1 cholinergic receptors to facilitate restorative sleep

Innovative and proprietary PROTECTIC® Rapid drug exposure following nighttime administration

Differentiators:

Relative to Oral Cyclobenzaprine
- Lower daytime exposure
- Avoids first-pass metabolism
- Reduces risk of pharmacological interference from major metabolite

Relative to Standard of Care
- Potential for better tolerability while maintaining efficacy
- Not scheduled with no recognized abuse potential

Patents Issued

*TNX-102 SL has not been approved for any indication.

Fibromyalgia

Status: Mid-Phase 3
- One positive Phase 3 study (RELIEF) completed
- Second Phase 3 study (RALLY) missed primary endpoint
- Confirmatory Phase 3 study (RESILIENT) enrollment complete

Next Steps: Topline results expected 4Q 2023

Fibromyalgia-Type Long COVID

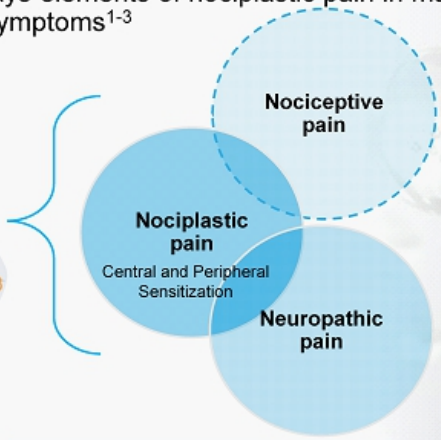
Status: Phase 2
- Phase 2 study (PREVAIL) enrollment complete

Next Steps: Topline results expected 3Q 2023

TONIX PHARMACEUTICALS

Fibromyalgia-Type Long COVID

- Long COVID is a heterogeneous condition that displays elements of nociplastic pain in many individuals, who experience otherwise unexplained symptoms[1-3]



Symptoms (multi-site pain, fatigue, sleep disorders and cognitive dysfunction) overlap with the key symptoms of fibromyalgia

Nociplastic pain[4]: (*new term for "Central and Peripheral Sensitization"*) Pain that arises from altered nociception despite no clear evidence of tissue damage, or for disease or lesion of the somatosensory system causing the pain

[1]Bierle et al., 2021. *J Prim Care Community Health*. 12:21501327211030826
[2]Moghimi et al., 2021. *Curr Neurol Neurosci Rep*. 21(9):44
[3]Thaweethai T, et al. 2023. JAMA. 2023 329(22):1934-1946
[4]Trouvin et al., 2019. *Best Pract Res Clin Rheumatol*. 33(3):101415

CNS PORTFOLIO

TONIX PHARMACEUTICALS

TNX-102 SL*: Fibromyalgia-Type Long COVID (PASC)
Cyclobenzaprine Protectic® Sublingual Tablets

PROFILE

- Occurs in approximately 19% of recovered COVID-19 patients[1]
- As many as 40% of Long COVID patients experience multi-site pain, a hallmark of fibromyalgia[2,3]
- Symptoms of Long COVID, like multi-site pain, fatigue and insomnia, are the hallmarks of chronic pain syndromes like fibromyalgia and myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS)
- In August 2022, the HHS released the National Research Action Plan on Long COVID[4] which endorses the connection between Long COVID and ME/CFS

DEVELOPMENT PROGRAM

Market Entry: Fibromyalgia-Type Long COVID (PASC)

Additional Indications: Fibromyalgia, PTSD, Agitation in Alzheimer's, Alcohol Use Disorder

Status: Phase 2 study PREVAIL enrollment complete

Next Steps: Topline results expected 3Q 2023

Patents Issued

*TNX-102 SL has not been approved for any indication.

[1]June 22, 2022- CDC - https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2022/20220622.htm
[2]Harris, H, et al. Tonix data on file. 2022
[3]TriNetX Analytics
[4]Department of Health and Human Services, Office of the Assistant Secretary for Health. 2022. National Research Action Plan on Long COVID.

TNX-102 SL: Phase 2 PREVAIL Study Design

PREVAIL Study

Study characteristics:

- Randomized, double-blind, placebo-controlled study of TNX-102 SL in fibromyalgia-type Long COVID
- U.S. sites only, completed enrollment of 63 patients

Primary Endpoint:

- Daily diary pain severity score change from baseline to Week 14 (TNX-102 SL vs. placebo)
  - Weekly averages of the daily numerical rating scale scores

TNX-102 SL once-daily at bedtime
5.6 mg (2 x 2.8 mg tablets)*

Placebo once-daily at bedtime

14 weeks

*Two week run in at 2.8 mg dose at bedtime, followed by 12 weeks at 5.6 mg dose

ClinicalTrials.gov Identifier: NCT05472090
"A Phase 2 Study to Evaluate the Efficacy and Safety of TNX-102 SL in Patients With Multi-Site Pain Associated With Post-Acute Sequelae of SARS-CoV-2 Infection (PREVAIL)"

Upcoming Expected Topline Results

Third Quarter 2023

Fourth Quarter 2023

TNX-102 SL for Long COVID
- Topline Results
- Phase 2 Proof-of-Concept Study
- Registration-Quality

TNX-102 SL for Fibromyalgia
- Topline Results
- ***Phase 3 Potential NDA Enabling Study***
- Registration-Quality

TNX-1900 for Chronic Migraine
- Topline Results
- Phase 2 Proof-of-Concept Study
- Registration-Quality

TNX-601 ER for Depression
- Topline Results
- Phase 2 Proof-of-Concept Study
- Registration-Quality

TNX-102 SL*: Fibromyalgia
Cyclobenzaprine Protectic® Sublingual Tablets

PROFILE

Fibromyalgia (FM) is a chronic pain disorder resulting from amplified sensory and pain signaling within the CNS

- Afflicts an estimated 6-12 million adults in the U.S., approximately 90% of whom are women[1]
- Symptoms include chronic widespread pain, nonrestorative sleep, fatigue, and cognitive dysfunction
- Patients struggle with daily activities, have impaired quality of life, and frequently are disabled
- Physicians and patients report common dissatisfaction with currently marketed products

When the check engine light malfunctions, the light is on even though the car is not malfunctioning

Patents Issued

DEVELOPMENT PROGRAM

Market Entry: Fibromyalgia

Additional Indications: Long COVID, PTSD, Agitation in Alzheimer's, Alcohol Use Disorder

Status: One Positive Phase 3 study RELIEF completed[2]

Second Phase 3 study RALLY missed primary endpoint

Confirmatory Phase 3 study RESILIENT enrollment complete

Next Steps: Topline results expected 4Q 2023

*TNX-102 SL has not been approved for any indication.

[1]American Chronic Pain Association (www.theacpa.org, 2019)
[2]Lederman et al., (2023) *Arthritis Care & Research* "Efficacy and Safety of TNX-102 SL (Sublingual Cyclobenzaprine) for the Treatment of Fibromyalgia: Results From the RELIEF Trial", doi: 10.1002/acr.25142. Epub ahead of print. PMID: 37165930.

TNX-102 SL: Phase 3 RESILIENT Study Design

RESILIENT Study

CNS PORTFOLIO

General study characteristics:

- Randomized, double-blind, placebo-controlled study in fibromyalgia
- U.S. sites only, completed enrollment of 457 patients

Primary Endpoint:

- Daily diary pain severity score change from baseline to Week 14 (TNX-102 SL vs. placebo)
  - Weekly averages of the daily numerical rating scale scores

Key Secondary Endpoints:

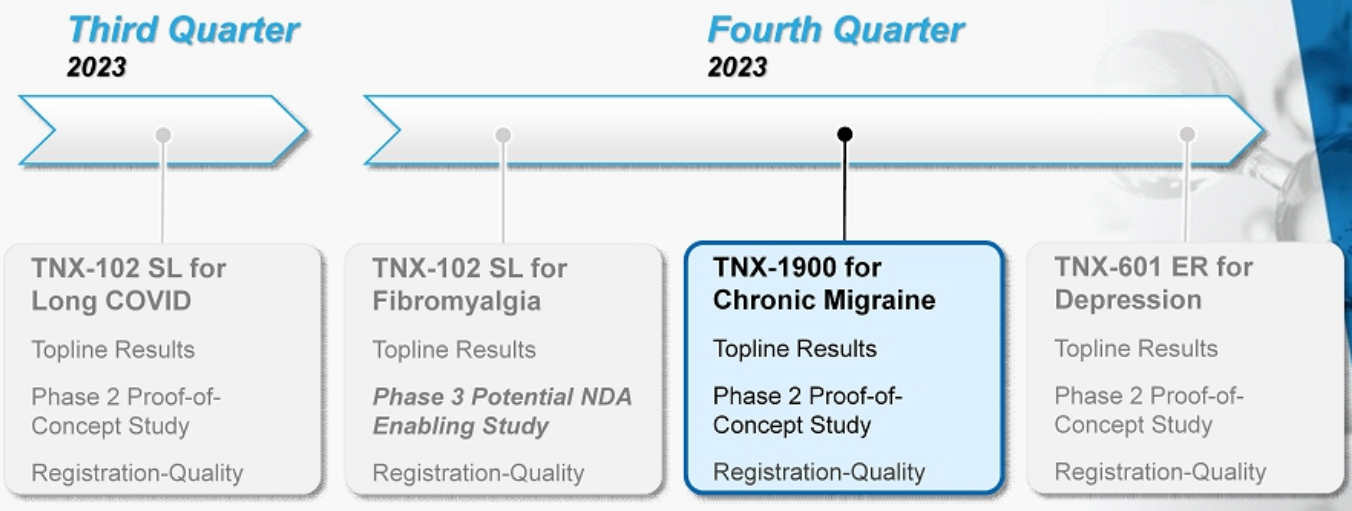
- Fibromyalgia Impact Questionnaire - Revised (FIQ-R) Symptom Domain score
- Patient Global Impression of Change responder analysis
- FIQ-R Function Domain score
- PROMIS Sleep Disturbance instrument
- PROMIS Fatigue instrument
- Weekly average of the daily diary assessment of sleep quality

*Two week run in at 2.8 mg dose at bedtime, followed by 12 weeks at 5.6 mg dose

ClinicalTrials.gov Identifier: NCT05273749
A Phase 3 Study to Evaluate the Efficacy and Safety of TNX-102 SL Taken Daily in Patients With Fibromyalgia (RESILIENT)

TONIX PHARMACEUTICALS

Upcoming Expected Topline Results



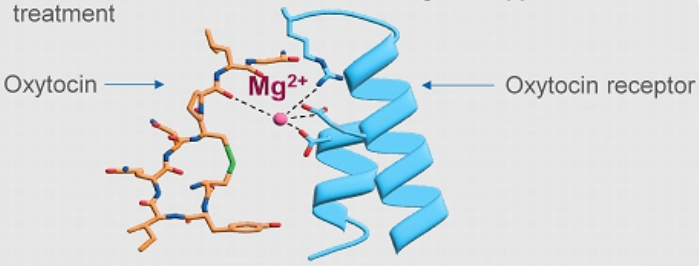
TONIX PHARMACEUTICALS

TNX-1900*: Prevention of Headache in Chronic Migraine
Intranasal Potentiated Oxytocin (OT) with Magnesium

PROFILE

- Intranasal OT has potential utility in treating migraine[1]
- Magnesium is known to potentiate the binding of OT to its receptor[2,3]
- One billion individuals worldwide suffer from migraines

Differentiator: Novel non-CGRP antagonist approach to treatment



Patents Issued

DEVELOPMENT PROGRAM

Market Entry: Chronic Migraine

Additional Indications: Acute Migraine, Craniofacial Pain, Insulin Resistance, Binge Eating Disorder

Status: Phase 2 study PREVENTION enrollment complete[4]

Next Steps: Topline results from PREVENTION expected 4Q 2023

Investigator initiated Phase 2 trials in adolescent obesity, social anxiety disorder, and binge eating disorder are enrolling 3Q 2023

*TNX-1900 has not been approved for any indication. CGRP = calcitonin gene-related peptide.

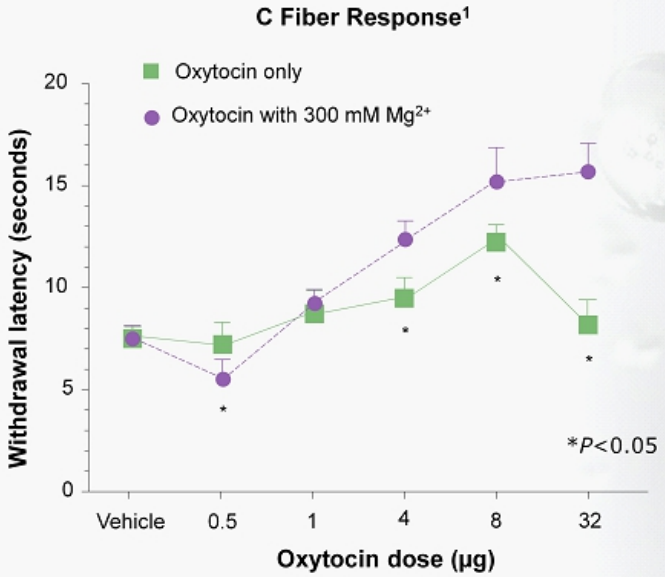
[1]Tzabazis et al., 2017. *Headache*. 57 Suppl 2:64-75
[2]Antoni et al., 1989. *Biochem J*. 257(2):611-4
[3]Meyerowitz et al., 2022. *Nat Struct Mol Biol*. (3):274-281
[4]A Phase 2 trial under an investigator-initiated IND has been completed in the U.S. using TNX-1900

TONIX PHARMACEUTICALS

Oxytocin Effects – Addressing the "Inverted U" Dose Response
Addition of Mg^{2+} Augments Oxytocin-Induced Analgesia in Animal Model

- A ***nonlinear dose response*** decreases efficacy at higher doses
- Addition of ***Mg^{2+} rescues the efficacy*** of oxytocin at high doses

***in vivo* effect of Mg^{2+} ion addition with intranasal oxytocin-induced craniofacial analgesia on the withdrawal response time to noxious heat stimulation of the cheek of pre-inflamed rat**



[1]Adapted from: Bharadwaj VN, et al. *Pharmaceutics*. 2022;14(5):1105.

TONIX PHARMACEUTICALS

TNX-1900: Phase 2 PREVENTION Study Design

PREVENTION Study

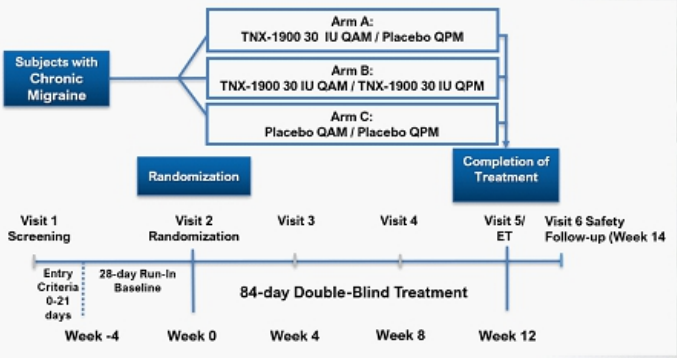
CNS PORTFOLIO

General study characteristics:

- Randomized, double-blind, placebo-controlled study (three arms– two treatment regimens and one placebo) in chronic migraine
- U.S. sites only
- Fully enrolled with 88 patients
- Topline results expected 4Q'23

Primary Endpoint:

- Mean change in the number of migraine headache days between the 28-day Run-In phase and the last 28-days of the Treatment phase (TNX-1900 vs. placebo)

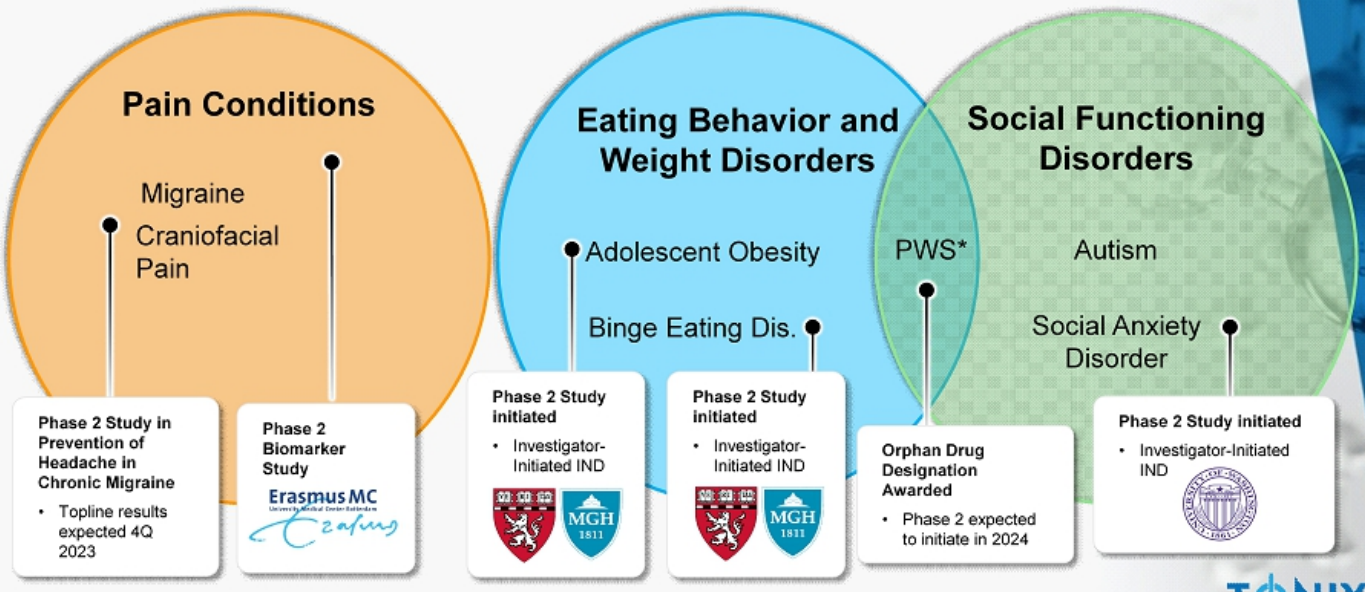


ClinicalTrials.gov Identifier: NCT05679908
A Study to Evaluate the Efficacy and Safety of TNX-1900 in Patients With Chronic Migraine (PREVENTION)

TONIX PHARMACEUTICALS

Potential Applications of TNX-1900 and TNX-2900

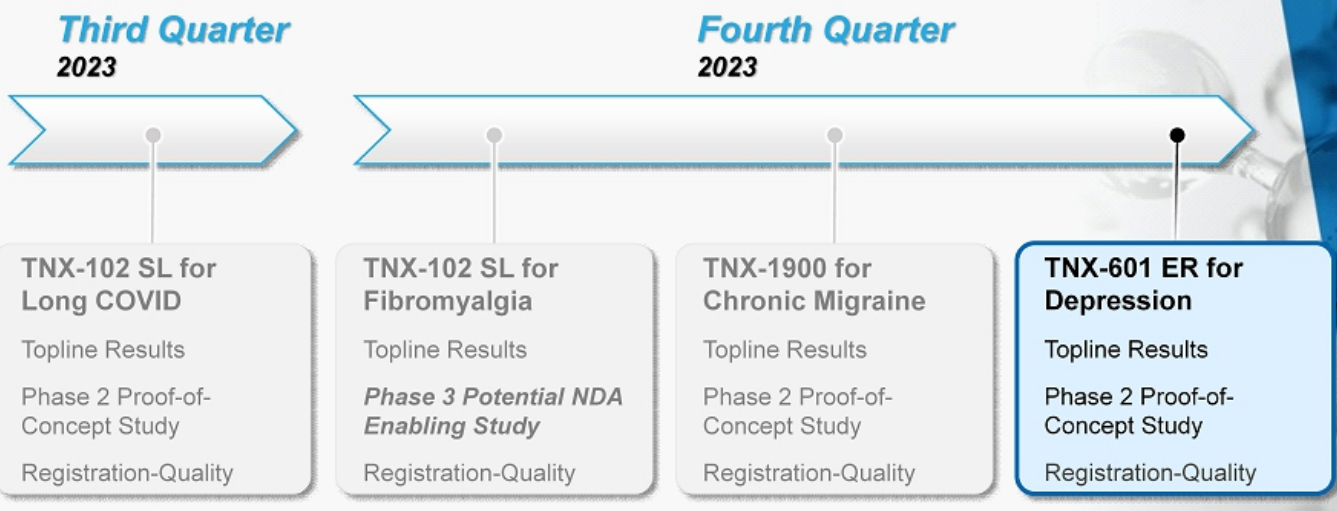
CNS PORTFOLIO



*Prader-Willi Syndrome

TONIX PHARMACEUTICALS

Upcoming Expected Topline Results



TNX-601 ER*: Depression
Tianeptine Hemioxalate Extended-Release Tablets (39.4 mg)

CNS PORTFOLIO

PROFILE

- A novel, oral, extended-release once-daily tablet
- Treatment effect of tianeptine sodium immediate release *t.i.d.* in depression is well-established
- Tianeptine restores neuroplasticity in animal models
- PPAR-β/δ and PPAR-γ agonist[1]

Differentiators:

Relative to tianeptine IR available ex-US:

- Once daily dosing

Relative to traditional antidepressants:

- Unique mechanism of action – beyond neurotransmitter modulation
- Tianeptine sodium IR has similar efficacy but less weight gain or sexual side effects than traditional antidepressants
- Tianeptine's side effects are described in labeling in countries in which it is marketed[2]

Patents Issued

DEVELOPMENT PROGRAM

Market Entry: Major Depressive Disorder (MDD)

Additional Indications: PTSD, Neurocognitive Disorder From Corticosteroids, Alzheimer's Disease[3]

Status: Phase 2 MDD study UPLIFT enrollment complete

Next Steps:

Topline results expected 4Q 2023

*TNX-601 ER has not been approved for any indication.

[1]Sullivan G et al. Poster presentation at the American Society of Clinical Psychopharmacology, June 2023. https://bit.ly/42o3jnV
[2]Summary of product characteristics (SmPC), European Medicines Agency, Stablon®, www.servier.ci/sites/default/files/spc-pil/SPC_Stablon_1.pdf accessed 7-16-23.
[3]Garcia-Alberca et al., 2022. *J Alzheimers Dis.* 88(2):707-720

TNX-601 ER - Phase 2 UPLIFT* Study Design

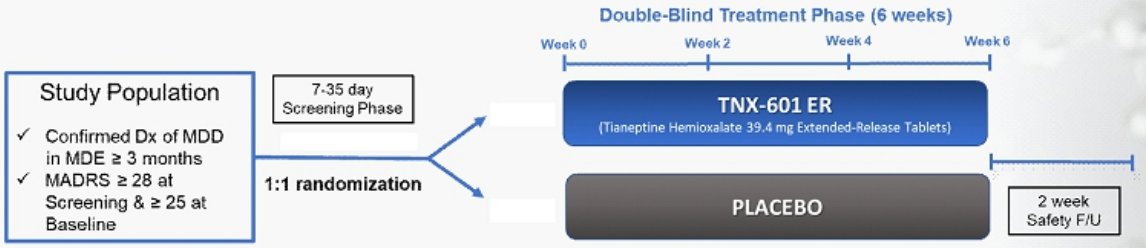
UPLIFT Study

General study characteristics:

- Randomized, double-blind, placebo-controlled study in Major Depressive Disorder to evaluate monotherapy with TNX-601 ER versus placebo
- Parallel design with two arms – treatment with tianeptine hemioxalate 39.4 mg or placebo
- U.S. sites only, completed enrollment of 132 patients

Primary Endpoint:

- Mean change from baseline in the Montgomery-Åsberg Depression Rating Scale (MADRS) total score at Week 6



*ClinicalTrials.gov Identifier: NCT05686408

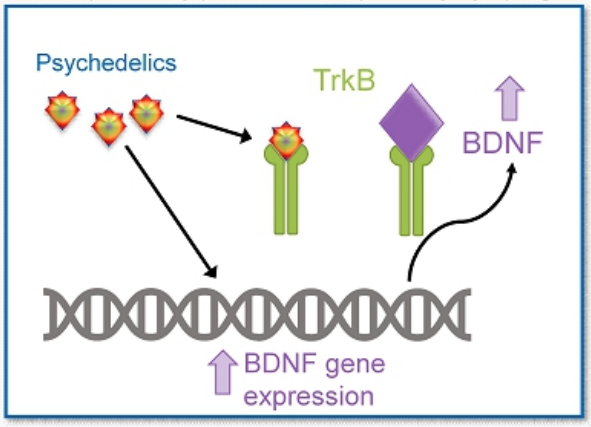
Abbreviations: Dx, diagnosis; ER, extended-release; F/U, follow-up; MDD, major depressive disorder; MDE, major depressive episode; N, number

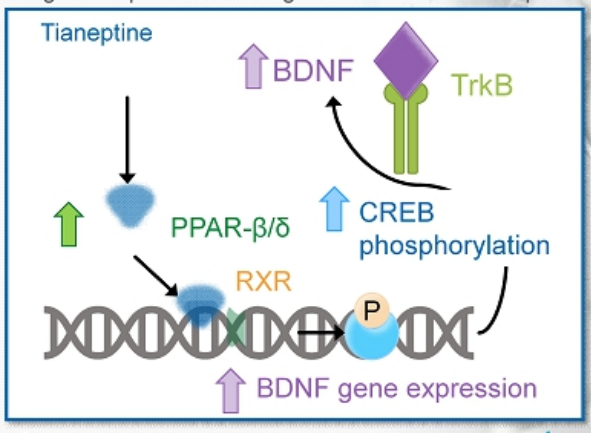
TONIX PHARMACEUTICALS

Tianeptine Shares a Neuroplasticity-Promoting Mechanism With Psychedelics

The neurotrophic growth factor BDNF plays a key role in the regulation of synaptic plasticity, and is diminished in populations suffering from anxiety and depression[1]

- Psychedelics may promote neuroplasticity both by directly binding to BDNF receptor TrkB, and by increasing BDNF gene expression[1,2]
- Tianeptine may promote neuroplasticity by upregulating BDNF gene expression through activation of PPAR-β/δ[3,4]





BDNF=brain-derived neurotrophic factor; CREB=cAMP response element binding protein; TrkB=tyrosine receptor kinase B

[1]de Vos CMH, et al. *Front Psychiatry*. 2021;12:724606
[2]Moliner R, et al. *Nat Neurosci*. 2023;26(6):1032-1041
[3]Ji MJ, et al. *Int J Neuropsychopharmacol*. 2015;19(1):pyv083
[4]Seo MK, et al. *Psychopharmacology (Berl)*. 2016;233(13):2617-2627

TONIX PHARMACEUTICALS

TNX-601 ER – Racemic Tianeptine – Composed of Two Isomers

Racemic tianeptine:
- Approved in Europe and ex-US
- 1:1 mixture of 2 mirrorr-image isomers[1,2]
- Weak μ-opioid receptor agonism[2]
  - Risk of abuse or diversion for euphoric effects[3]

	Racemic- Tianeptine	*(S)-* Tianeptine TNX-4300	*(R)-* Tianeptine
Activates PPAR-β/δ	+	+	-
Neuroplasticity	+	+	-
Novel Object Test[5]	+	+	-
μ-Opioid Receptor	+	-	+
Forced Swim Test[6]	+	-	+
Activates PPAR-γ	+	+	+

_(S)_-Tianeptine: PPAR-β/δ agonist, no opiate liability[4]
- New mechanism of action for treating depression

_(R)_-Tianeptine: opiate liability[4]
- Weak μ-opioid receptor agonism[4]

_(S)_-tianeptine

_(R)_-tianeptine

[1]Stablon. Summary of product characteristics. Les Laboratoires Servier Industrie; 2014.
[2]PubChem. Accessed November 10, 2022. https://pubchem.ncbi.nlm.nih.gov/compound/Tianeptine
[3]Drug Enforcement Administration. May 2019. Accessed November 11, 2022. https://www.deadiversion.usdoj.gov/drug_chem_info/tianeptine.pdf
[4]Sullivan G et al. Poster presentation at the American Society of Clinical Psychopharmacology, June 2023. https://bit.ly/42o3jnV
[5]Rat Novel Object Recognition Test
[6]Mouse Porsolt Forced Swim Test

CNS PORTFOLIO

TONIX PHARMACEUTICALS

TNX-4300*: Depression, Alzheimer's & Parkinson's diseases Estianeptine (Single *(S)*-isomer of Tianeptine)

PROFILE

- Single isomer, oral treatment
- Proposed mechanism of action from lab studies indicates estianeptine is the active ingredient of TNX-601 ER[1]
  - PPAR-β/δ and PPAR-γ agonist
  - Free of μ-opioid receptor activity
- Estianeptine restores neuroplasticity in tissue culture

Differentiators:

Relative to racemic tianeptine IR or TNX-601 ER:
- Lack of opioid liability

Relative to traditional antidepressants:
- Unique mechanism of action – beyond neurotransmitter modulation
- Racemic tianeptine sodium IR has similar efficacy but fewer side effects than traditional antidepressants

Patents Issued

DEVELOPMENT PROGRAM

Market Entry: Major Depressive Disorder (MDD)

Additional Indications: PTSD, Neurocognitive Disorder From Corticosteroids, Alzheimer's Disease[2]

Status: Pre-clinical

Next Steps: Expect IND can be supported by pre-clinical and clinical data from TNX-601 (racemic tianeptine) development

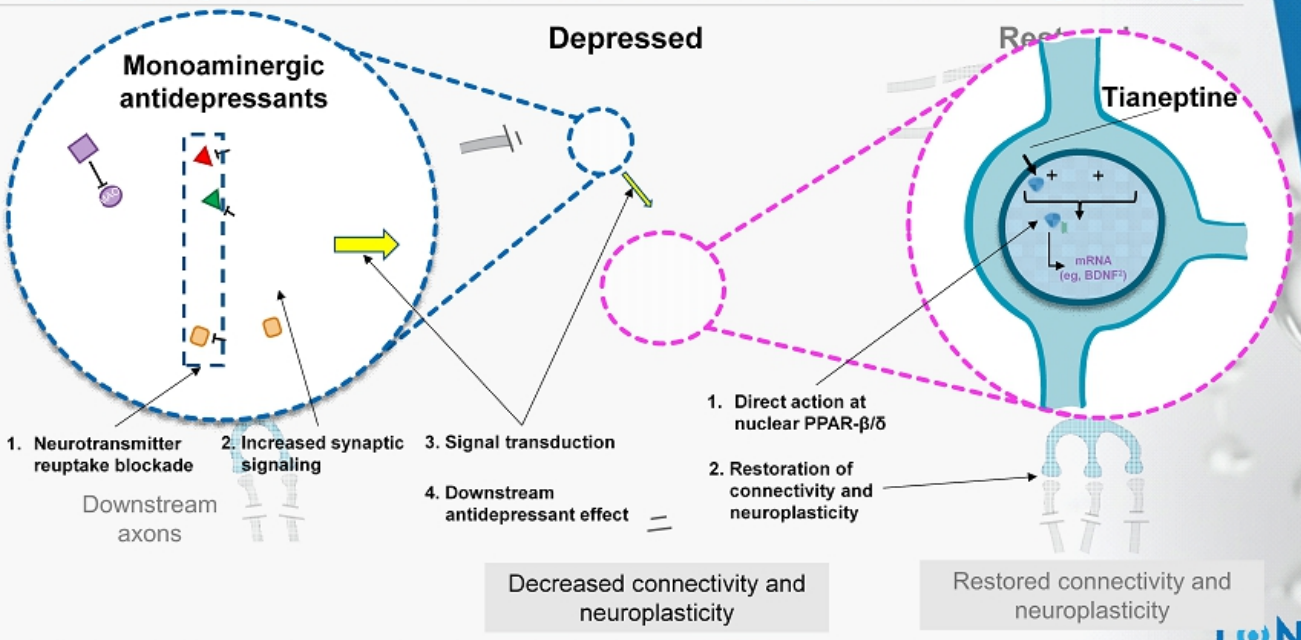
*TNX-4300 is in the pre-IND stage of development and has not been approved for any indication

[1]Sullivan G et al. Poster presentation at the American Society of Clinical Psychopharmacology, June 2023. https://bit.ly/42o3jnV
[2]Garcia-Alberca et al., 2022. *J Alzheimers Dis.* 88(2):707-720

CNS PORTFOLIO

TONIX PHARMACEUTICALS

While Monoaminergic Antidepressants Work at the Synapse, *(S)*-Tianeptine "Cuts in Line" to More Directly Affect Neuroplasticity[1]



[1]Sullivan G et al. Poster presentation at the American Society of Clinical Psychopharmacology, June 2023. https://bit.ly/42o3jnV
[2]BDNF=brain-derived neurotrophic factor.

TNX-1300*: Cocaine Intoxication
Cocaine Esterase (CocE)

PROFILE

Cocaine is the main cause for drug-related ED visits[1]

CocE is a recombinant protein that degrades cocaine in the bloodstream

- Rapidly reverses physiologic effects of cocaine
- Drops plasma exposure by 90% in 2 minutes

Differentiators: Rapidly metabolizes cocaine in the bloodstream; no other product currently on the market for this indication

Patents Issued

DEVELOPMENT PROGRAM

Market Entry: Cocaine Intoxication

Status: Mid-Phase 2

Next Steps: Initiate new Phase 2 trial 3Q 2023

- Single-blind, placebo (+ usual care) controlled, randomized, potentially pivotal study
- Expected to enroll approximately 60 emergency department patients at sites in the US

FDA Breakthrough Therapy Designation

Awarded Cooperative Agreement Grant from National Institute on Drug Abuse (NIDA)

*TNX-1300 has not been approved for any indication.

[1]Havakuk et al., 2017. *J Am Coll Cardiol.* 70:101-113
ED = emergency department.

TNX-1500*

Next Generation α-CD40 Ligand (CD40L) Antibody

The CD40-CD40L pathway is a pivotal immune system modulator and a well-established and promising treatment target

Differentiators: Expected to deliver efficacy without compromising safety

First Generation: Development halted due to thromboembolic (TE) complications—blood clots—traced to Fc gamma receptor (FcγR)

Second Generation: Eliminated the FcγR TE complication but potency and half life was reduced, limiting utility

Third Generation (TNX-1500): Re-engineered to better modulate the binding of FcγR.

*TNX-1500 has not been approved for any indication. Patents filed.

Prevention of Allograft Rejection

Status: Phase 1 currently enrolling

- Collaborations ongoing with Mass General Hospital on heart and kidney transplantation in non-human primates

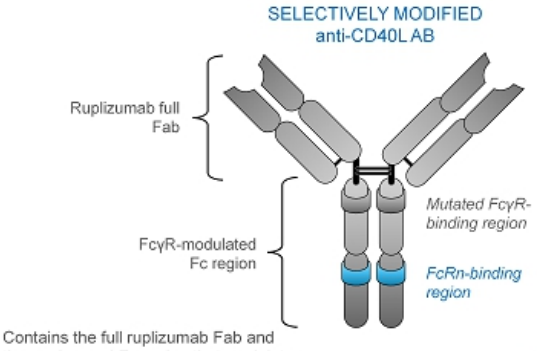
Next Steps: Initiate Phase 2 study in Kidney Transplant Recipients

Autoimmune Diseases

Status: Potential future indications include:

Sjögren's Syndrome, Systemic Lupus Erythematosus

- These indications require large studies, but represent large target markets



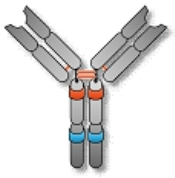
Contains the full ruplizumab Fab and the engineered Fc region that modulates FcγR-binding, while preserving FcRn function.

TONIX PHARMACEUTICALS

Third-Generation α-CD40L
Engineered to Decrease Risk of Thrombosis

IMMUNOLOGY PORTFOLIO

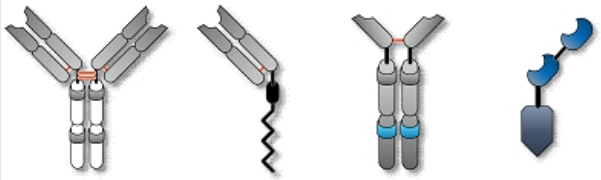
First-generation
anti-CD40L mAbs



Ruplizumab

Constant fragment (Fc) domain interacted with FcγRIIA (CD32A), which suggested a mechanism for the increased risk of thrombosis.[1,2]

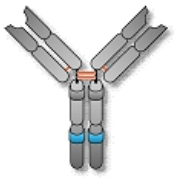
Second-generation
anti-CD40L proteins



Aglycosyl Ruplizumab *Dapirolizumab* *Letolizumab* *Dazodalibep*

Second-generation anti-CD40L proteins exhibited dramatically reduced binding to FcγRIIA[3-6] but had other issues, including decreased efficacy, shortened half-life, or engendering of anti-drug antibodies (ADAs).[7-9]

Third-generation
anti-CD40L mAbs*



TNX-1500

TNX-1500 is engineered to target CD40L therapeutically while reducing FcγRIIA binding and thereby lowering the potential for thrombosis.[1-9]

*Sanofi's frexalimab (formerly SAR441344) and Eledon's tegoprubart (formerly AT-1501) also are Fc modified

[1]Inwald et al., 2003. *Circ Res.* 92(9):1041-1048
[2]Robles-Carrillo et al., 2010. *J Immunol.* 185(3):1577-1583
[3]Shock et al., 2015. *Arthritis Res Ther.* 17(1):234
[4]Xie et al., 2014. *J Immunol.* 192(9):4083-4092
[5]Ferrant et al., 2004. *Int Immunol.* 16(11):1583-1594
[6]Karnell et al., 2019. *Sci Transl Med.* 11(489):eaar6584
[7]ClinicalTrials.gov identifier: NCT02273960. Updated July 16, 2019. Accessed June 1, 2021. https://clinicaltrials.gov/ct2/show/results/NCT02273960?view=results
[8]Waters, 2018. *Biocentury.*
[9]Company data

TONIX PHARMACEUTICALS

TNX-1500 anti-CD40L Monoclonal Antibody

IMMUNOLOGY PORTFOLIO

Proposed indication - prevention of rejection in kidney transplant:

- Supported by pre-clinical studies

Phase 1 study initiated:

- A Phase 1 study of TNX-1500 was initiated in the third quarter of 2023.

Peer reviewed articles:

- Two articles have recently published in the *American Journal of Transplantation* that demonstrate TNX-1500 prolongs non-human primate renal and heart allograft survival.[1,2]

[1]Lassiter, G., et al. (2023). TNX-1500, a crystallizable fragment–modified anti-CD154 antibody, prolongs non-human primate renal allograft survival. *American Journal of Transplantation.* April 3, 2023. https://doi.org/10.1016/j.ajt.2023.03.022
[2]Miura, S., et al. (2023) TNX-1500, a crystallizable fragment–modified anti-CD154 antibody, prolongs non-human primate cardiac allograft survival. *American Journal of Transplantation.* April 6, 2023. https://doi.org/10.1016/j.ajt.2023.03.025

TONIX PHARMACEUTICALS

Other anti-CD40L Monoclonal Antibodies in Development

Sanofi – Sjögren's Syndrome (SjS), Multiple Sclerosis (MS), Systemic Lupus Erythematosus (SLE)

- Phase 2 Trial Currently Enrolling in SjS (NCT04572841) and SLE (NCT05039840)
- Active Phase 2 Trial in Relapsing MS (NCT04879628) – positive results reported[1,2]
- Frexalimab, f.k.a.SAR441344 (Fc-modified)

Horizon (being acquired by Amgen) – Sjögren's Syndrome (SjS)

- Two Positive Phase 2 studies reported[3,4]
- Dazodalibep (tn03 fusion protein)

Eledon – Kidney Transplant

- Phase 2 Trial Completed in ALS (NCT04322149)
- Phase 1/2 Trial Currently Enrolling in Kidney Transplant (NCT05027906)
- Tegoprubart, f.k.a. AT-1501 (Fc-modified)

UCB (Co-developed with Biogen) – Systemic Lupus Erythematosus (SLE)

- Phase 3 Trial Currently Enrolling (NCT04294667)
  - Topline results expected 1H 2024[5]
- Dapirolizumab pegol (pegylated Fab)

[1]Sanofi press release May 31, 2023 "Press Release: Positive Phase 2 data of novel investigational anti-CD40L antibody frexalimab show significantly reduced disease activity in relapsing multiple sclerosis": www.sanofi.com/en/media-room/press-releases/2023/2023-05-31-05-00-00-2678991 (accessed August 11 2023)
[2]Carvalho, T. *Nature Medicine* (News) (2023). 29:1882
[3]Horizon press release September 12, 2022 "Horizon Therapeutics plc Announces Phase 2 Trial Evaluating Dazodalibep for the Treatment of Sjögren's Syndrome Meets Primary Endpoint" https://ir.horizontherapeutics.com/news-releases/news-release-details/horizon-therapeutics-plc-announces-phase-2-trial-evaluating (accessed August 11 2023)
[4]Horizon Press Release January 18, 2023 "Horizon Therapeutics plc Announces Phase 2 Trial Evaluating Dazodalibep for the Treatment of Sjögren's Syndrome Meets Primary Endpoint in the Second Study Population; Only Phase 2 Trial to Meet Primary Endpoint in Both Patient Populations
[5]https://www.ucb.com/our-science/pipeline

TNX-801*

Recombinant Pox Vaccine (RPV) Platform Using Live Virus Technology

Differentiators:

- **Live virus vaccines are the most established vaccine technology**
  - Starting with Edward Jenner's smallpox vaccine, the first vaccine, which eradicated smallpox
  - Prevents forward transmission
  - Effective in eliciting durable or long-term immunity
- **Economical to manufacture at scale**
  - Low dose because replication amplifies dose in vivo
  - Single shot administration
- **Standard refrigeration required for shipping and storage**

*TNX-801 is in the pre-IND stage of development and has not been approved for any indication. Patents filed.

[1]Noyce et al., 2018. *PLoS One*. 13(1):e0188453.

Mpox and Smallpox Vaccine

Status: Preclinical

- TNX-801 is a cloned version of horsepox[1] (without any DNA insert) purified from cell culture

Milestone: Successful completion of pre-IND meeting

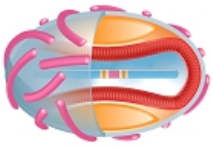
Next Steps: Preparation of IND submission

Vaccine for Future Emerging Infectious Diseases

Example: TNX-1850 for COVID-19

Status: Model System

TNX-801*
scHPXV (Horsepox)
212,811 bp

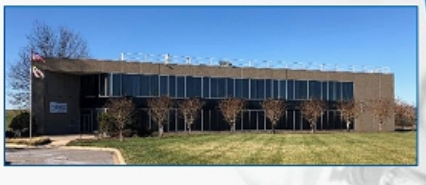


TONIX PHARMACEUTICALS

Internal Development & Manufacturing Capabilities

R&D Center (RDC) – Frederick, MD

- **Functions:**
  - Research advancing CNS and immunology drugs
  - Accelerated development of vaccines and antiviral drugs against COVID-19, its variants and other infectious diseases
- **Description:** ~48,000 square feet, BSL-2 with some areas designated BSL-3
- **Status:** Operational



Advanced Development Center (ADC) – North Dartmouth, MA

- **Function:** Development and clinical scale manufacturing of biologics
- **Description:** ~45,000 square feet, BSL-2
- **Status:** Operational

Key Development Partners

Massachusetts General Hospital · Harvard Medical School

TNX-1500: ALLOGRAFT REJECTION

Columbia University

TNX-1300: COCAINE INTOXICATION
TNX-1700: GASTRIC AND COLORECTAL CANCERS

Stanford University · Université de Genève

TNX-1900: MIGRAINE & OTHER INDICATIONS

University of Alberta · SR Southern Research

TNX-801: SMALLPOX AND MONKEYPOX VACCINE
TNX-1850: COVID-19 VACCINE

InsermTransfert · CHU de Toulouse · Aix*Marseille université

TNX-2900: PRADER-WILLI SYNDROME

Kansas State University

TNX-3700: COVID-19 VACCINE (ZINC NANOPARTICLE mRNA TECHNOLOGY)
TNX-2300: BOVINE PARAINFLUEZNA VIRUS

Upcoming: Expected Topline Clinical Data and Trial Initiations 2023

3rd Quarter

- **Phase 2 PREVAIL study of TNX-102 SL for fibromyalgia-type Long COVID**
  - Affects approximately 8 M adults in the U.S (40% of 1 in 5 adults with Long COVID)[1]

4th Quarter

- **Phase 2 PREVENTION study of TNX-1900 for chronic migraine**
  - Affects approximately 3-7 M adults in the U.S[2]
- **Phase 2 UPLIFT study of TNX-601 ER for major depressive disorder**
  - Affects approximately 47 M adults in the U.S (18.4% of population)[3]
- **Phase 3 RESILIENT study of TNX-102 SL for fibromyalgia**
  - Affects approximately 6-12 M adults in the U.S[4]

3rd Quarter Clinical Trial Initiations

- **Phase 1 study of TNX-1500 for prevention of allograft rejection - started**
- **Phase 2 study of TNX-1300 for the treatment of cocaine intoxication - expected**

[1]CDC - https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2022/20220622.htm
[2]Natoli et al., Global prevalence of chronic migraine: a systematic review. Cephalagia, 2010, 30:599-609
[3]CDC - https://www.cdc.gov/mmwr/volumes/72/wr/mm7224a1.htm?s_cid=mm7224a1_w
[4]American Chronic Pain Association (www.theacpa.org, 2019)

TONIX PHARMACEUTICALS

Zembrace® IMPORTANT SAFETY INFORMATION (1 of 2)

Zembrace SymTouch (Zembrace) can cause serious side effects, including heart attack and other heart problems, which may lead to death. Stop use and get emergency help if you have any signs of a heart attack:

- Discomfort in the center of your chest that lasts for more than a few minutes or goes away and comes back; severe tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw; pain or discomfort in your arms, back, neck, jaw or stomach; shortness of breath with or without chest discomfort; breaking out in a cold sweat; nausea or vomiting; feeling lightheaded

Zembrace is not for people with risk factors for heart disease (high blood pressure or cholesterol, smoking, overweight, diabetes, family history of heart disease) unless a heart exam shows no problem.

Do not use Zembrace if you have:

- History of heart problems; narrowing of blood vessels to your legs, arms, stomach, or kidney (peripheral vascular disease); uncontrolled high blood pressure; hemiplegic or basilar migraines. If you are not sure if you have these, ask your provider.
- Had a stroke, transient ischemic attacks (TIAs), or problems with blood circulation; severe liver problems; taken any of the following medicines in the last 24 hours: almotriptan, eletriptan, frovatriptan, naratriptan, rizatriptan, ergotamines, dihydroergotamine; are taking certain antidepressants, known as monoamine oxidase (MAO)-A inhibitors or it has been 2 weeks or less since you stopped taking a MAO-A inhibitor. Ask your provider for a list of these medicines if you are not sure.
- An allergy to sumatriptan or any of the components of Zembrace

Tell your provider about all of your medical conditions and medicines you take, including vitamins and supplements.

Zembrace can cause dizziness, weakness, or drowsiness. If so, do not drive a car, use machinery, or do anything where you need to be alert.

Zembrace® IMPORTANT SAFETY INFORMATION (2 of 2)

Zembrace may cause serious side effects including:

- Changes in color or sensation in your fingers and toes; sudden or severe stomach pain, stomach pain after meals, weight loss, nausea or vomiting, constipation or diarrhea, bloody diarrhea, fever; cramping and pain in your legs or hips; feeling of heaviness or tightness in your leg muscles; burning or aching pain in your feet or toes while resting; numbness, tingling, or weakness in your legs; cold feeling or color changes in one or both legs or feet; increased blood pressure including a sudden severe increase even if you have no history of high blood pressure; medication overuse headaches from using migraine medicine for 10 or more days each month. If your headaches get worse, call your provider.
- Serotonin syndrome, a rare but serious problem that can happen in people using Zembrace, especially when used with anti-depressant medicines called SSRIs or SNRIs. Call your provider right away if you have: mental changes such as seeing things that are not there (hallucinations), agitation, or coma; fast heartbeat; changes in blood pressure; high body temperature; tight muscles; or trouble walking.
- Hives (itchy bumps); swelling of your tongue, mouth, or throat
- Seizures even in people who have never had seizures before

The most common side effects of Zembrace include: pain and redness at injection site; tingling or numbness in your fingers or toes; dizziness; warm, hot, burning feeling to your face (flushing); discomfort or stiffness in your neck; feeling weak, drowsy, or tired.

Tell your provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of Zembrace. For more information, ask your provider.

This is the most important information to know about Zembrace but is not comprehensive. For more information, talk to your provider and read the Patient Information and Instructions for Use. You can also visit www.upsher-smith.com or call 1-888-650-3789. For full Prescribing Information, visit: https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=6e5b104f-2b9e-416e-92fb-ef1bdaea867d

You are encouraged to report adverse effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Zembrace is a prescription medicine used to treat acute migraine headaches with or without aura in adults who have been diagnosed with migraine.

Zembrace is not used to prevent migraines. It is not known if it is safe and effective in children under 18 years of age.

Tosymra® IMPORTANT SAFETY INFORMATION (1 of 2)

Tosymra® can cause serious side effects, including heart attack and other heart problems, which may lead to death. Stop Tosymra and get emergency medical help if you have any signs of heart attack:

- Discomfort in the center of your chest that lasts for more than a few minutes or goes away and comes back; severe tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw; pain or discomfort in your arms, back, neck, jaw, or stomach; shortness of breath with or without chest discomfort; breaking out in a cold sweat; nausea or vomiting; feeling lightheaded

Tosymra is not for people with risk factors for heart disease (high blood pressure or cholesterol, smoking, overweight, diabetes, family history of heart disease) unless a heart exam is done and shows no problem.

Do not use Tosymra if you have:

- History of heart problems; narrowing of blood vessels to your legs, arms, stomach, or kidney (peripheral vascular disease); uncontrolled high blood pressure; severe liver problems; hemiplegic or basilar migraines. If you are not sure if you have these, ask your healthcare provider.
- Had a stroke, transient ischemic attacks (TIAs), or problems with blood circulation; taken any of the following medicines in the last 24 hours: almotriptan, eletriptan, frovatriptan, naratriptan, rizatriptan, ergotamines, or dihydroergotamine. Ask your provider if you are not sure if your medicine is listed above
- are taking certain antidepressants, known as monoamine oxidase (MAO)-A inhibitors or it has been 2 weeks or less since you stopped taking a MAO-A inhibitor. Ask your provider for a list of these medicines if you are not sure
- An allergy to sumatriptan or any ingredient in Tosymra

Tell your provider about all of your medical conditions and medicines you take, including vitamins and supplements. Tosymra can cause dizziness, weakness, or drowsiness. If so, do not drive a car, use machinery, or do anything where you need to be alert.

TONIX PHARMACEUTICALS

Tosymra® IMPORTANT SAFETY INFORMATION (2 of 2)

Tosymra may cause serious side effects including:

- Changes in color or sensation in your fingers and toes; sudden or severe stomach pain, stomach pain after meals, weight loss, nausea or vomiting, constipation or diarrhea, bloody diarrhea, fever; cramping and pain in your legs or hips, feeling of heaviness or tightness in your leg muscles, burning or aching pain in your feet or toes while resting, numbness, tingling, or weakness in your legs, cold feeling or color changes in one or both legs or feet; increased blood pressure including a sudden severe increase even if you have no history of high blood pressure; medication overuse headaches from using migraine medicine for 10 or more days each month. **If your headaches get worse, call your provider**.
- Serotonin syndrome, a rare but serious problem that can happen in people using Tosymra, especially when used with anti-depressant medicines called SSRIs or SNRIs. **Call your provider right away if you have**: mental changes such as seeing things that are not there (hallucinations), agitation, or coma; fast heartbeat; changes in blood pressure; high body temperature; tight muscles; or trouble walking.
- Seizures even in people who have never had seizures before

The most common side effects of Tosymra include: tingling, dizziness, feeling warm or hot, burning feeling, feeling of heaviness, feeling of pressure, flushing, feeling of tightness, numbness, application site (nasal) reactions, abnormal taste, and throat irritation.

Tell your provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of Tosymra. For more information, ask your provider.

This is the most important information to know about Tosymra but is not comprehensive. For more information, talk to your provider and read the Patient Information and Instructions for Use. You can also visit www.upsher-smith.com or call 1-888-650-3789. For full Prescribing Information, visit: https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=015a5cf9-f246-48bc-b91e-cd730a53d8aa

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Tosymra is a prescription medicine used to treat acute migraine headaches with or without aura in adults.

Tosymra is not used to treat other types of headaches such as hemiplegic or basilar migraines or cluster headaches.

Tosymra is not used to prevent migraines. It is not known if Tosymra is safe and effective in children under 18 years of age.

TONIX PHARMACEUTICALS