#### FORM 4

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

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB A	APPROVAL
OMB	3235
Number:	028
Expires:	November 30 201
Estimated	d average
ourden h	ours per
response	0

(Print or Type Respon	nses)										
1. Name and Address LEDERMAN SE	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 _X_ 10% Owner _X_ Officer (give title Other (specify below)				
(Last) (I C/O TONIX PHA HOLDING CORF AVE., SUITE 306		3. Date of Earliest Transaction (Month/Day/Year) 05/20/2013						below) Chief Executive Officer			
(Street) NEW YORK, NY 10022			4. If Amendment, Date Original Filed(Month/Day/Year)						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 Acc						Acqui	uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect	ì		d (A) d of (A) 4 and (A) or	D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock, \$0.001 par value	05/20/2013			P	•	600	A	\$ 7	37,909	D	
Common Stock, \$0.001 par value	05/20/2013		Р			400	A	\$ 7.75	38,309	D	
Reminder: Report on directly or indirectly.	a separate line for ea	nch cla	ass of securitie	s benefic	ially	owned					
					inf red	ormation	n cor res	itaine pond	nd to the collection ed in this form are r unless the form dis control number.	not	SEC 1474 (9-02)

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction	3A. Deemed	4.	5	١.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Numb	er	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	o	of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Γ	Deriva	tive			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Securi	ties			(Inst	. 3 and		Owned	Security:	(Instr. 4)
	Security				Α	Acqui	red			4)			Following	Direct (D)	
					()	A) or							Reported	or Indirect	
					Г	Dispos	sed						Transaction(s)	(I)	
					О	of (D)							(Instr. 4)	(Instr. 4)	
					(]	Instr.	3,								
					4	, and	5)								
											Amount				
								Date	Evniration		or				
								Exercisable	Expiration Date	Title	Number				
								Lacicisable	Date		of				
				Code V	V (	(A)	(D)				Shares				

#### **Reporting Owners**

Depositing Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LEDERMAN SETH C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVE., SUITE 306 NEW YORK, NY 10022	X	X	Chief Executive Officer				

#### **Signatures**

/s/ Seth Lederman 05/20/2013	/s/ Seth Lederman	05/20/2	2013

Signature of Reporting Person	Date
-Signature of Reporting Person	

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person,  $\emph{see}$  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).

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.