FORM 4

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

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

OMB APPROVAL
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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	ype Respons	es)													
Name and Address of Reporting Person AVIDSON STUART			Symbol	Tonix Pharmaceuticals Holding Cor				Officer (give titleOther (specify below)							
HOLDIN	NIX PHAR NG CORP, E, STE 30	,	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2014				pelow)								
NEW YO	ORK, NY		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				ı.				
(City)	(St	ate) (Zip)	Table I - N	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							d				
1.Title of S (Instr. 3)	E	Date Ex Month/Day/Year) and	y Month/Day/Year)	ransactio ode nstr. 8)	on Ac Dis (In	Ò	A) or 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Secur Benef Follo Trans	nount of rities ficially Owned wing Reported saction(s) : 3 and 4)	l Form:	ect (Instr	direct ficial ership			
directly or		separate line for each			Perse information required	ons who mation ired to rently va	containe espond u lid OMB o	d in t unles cont	the collection this form are ss the form rol number.	e not		C 1474 (9-02)			
			rivative Securities ., puts, calls, warr												
1. Title of Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security		****	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)			Expiration (Month	oate Exercisable and iration Date onth/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A) (I	Date Exercis		Expiration Date	Title	Amount or Number of Shares				
Stock	\$ 9.87	06/17/2014		A	4	5,000	(1))	06/17/2024	Common	5,000	\$ 0 (2)	5,000	D	

Reporting Owners

Depositing Owner Name / Address	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
DAVIDSON STUART						
C/O TONIX PHARMACEUTICALS HOLDING CORP	X					
509 MADISON AVENUE, STE 306	Λ					
NEW YORK, NY 10022						

Signatures

/s/ Stuart Davidson	06/19/2014
**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).

- $\textbf{(1)} \ The \ option \ vests \ 1/3rd \ on \ the \ first \ anniversary \ of \ issuance \ and \ 1/36th \ each \ month \ thereafter \ for \ 24 \ months.$
- (2) The option was granted pursuant to the Issuer's 2014 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.