FORM 4	4
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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).

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

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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

(Print or Type Responses)											
1. Name and Address of Reporting Po GERSHELL LELAND	2. Issuer Name a Tonix Pharmace					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) C/O TONIX PHARMACEUTIO HOLDING CORP, 509 MADIS 306		3. Date of Earliest Transaction (Month/Day/Year) 09/28/2015)	X Officer (give title below) Other (specify below) Chief Financial Officer			
(Street) NEW YORK, NY 10022	4. If Amendment,	Date Origi	inal F	iled(Montl	n/Day/Ye	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 Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	Code (Instr. 8)	ction	*			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock, \$0.001 par value	09/28/2015		Р		400	А	\$ 5.825 (1)	19,260	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, caus, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	5. Nur	nber	6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n o	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Ε	Deriva	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	Securi	ties			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	Acqui	red			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				(.	A) or				4)			Following	Direct (D)	
					Γ	Dispo	sed						Reported	or Indirect	
						of (D)							Transaction(s)	< /	
					`	Instr.							(Instr. 4)	(Instr. 4)	
					4	l, and	5)								
											Amount				
								Date	Evaluation		or				
								Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	/ ((A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GERSHELL LELAND C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVE., STE 306 NEW YORK, NY 10022			Chief Financial Officer				

Signatures

/s/ Leland Gershell	09/29/2015
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).

The common stock was purchased by the reporting person in open market transactions on the transaction date, with a volume weighted average purchase price of \$5.825. (1) The range of purchase prices on the transaction date was \$5.82 to \$5.83 per share. The reporting person undertakes to provide, upon request by the SEC staff, the issuer,

or a security holder of the issuer, full information regarding the number of shares purchased at each price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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