FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
nours per response	0.5

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

1. Name and Address of Reporting Person *- Saks Samuel R			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 306			3. Date of Earliest Transaction (Month/Day/Year) 05/27/2016					_		ve title below)		er (specify below	v)		
(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				ine)		
	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						es Acquire	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		:	2. Transaction Date Month/Day/Year)		on Date, if	Code (Instr.		(A) or Disposed		of (D) B	Amount of Securities enefficially Owned Following eported Transaction(s)		F	Ownership of E	eneficial
				(Month/Day/	(Year)	Cod	e V	Amount	(A) or (D)		(Instr. 3 and 4) Direct (D) or Indirect (I) (Instr. 4)		Ownership Instr. 4)		
Reminder: R			(Derivative Se			conta form	ined in displays posed of,	this fo s a cur , or Bei	orm are nerently van	alid OMB(ed to respe	ond unless mber.	the	174 (9-02)
1. Title of Derivative	2. Conversion		3A. Deemed Execution Date	4. Transacti	5. ion of	arrants, . Numbe f	conta form nired, Dis options, o r 6. Date and Exp	ined in displays posed of, convertibe Exercisa piration [this for a cur or Berole secuble	rently vaneficially rities) 7. Title a Amount	oot require alid OMB o Owned and of	ed to respondent of the second	ond unless mber. 9. Number of Derivative	f 10. Ownershi	11. Natu
1. Title of	Conversion		3A. Deemed Execution Date	4. Transacti Code	5. of Do	arrants, . Numbe	conta form hired, Dis- options, or and Exp (Month	ined in displays posed of, convertib	this for a cur or Berole secuble	rently vaneficially urities)	oot require alid OMB of Owned and of ng s	ed to respondent of the second	ond unless mber. 9. Number of	f 10.	11. Nature of Indire Beneficie Ownersl (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date any	4. Transacti Code	5. See A. (A. D. of	Arrants, Number Perivative Equired A) or	conta form ired, Dis options, or r 6. Date and Exp	ined in displays posed of, convertibe Exercisa piration [this for a cur or Berole secuble	rently vaneficially rities) 7. Title a Amount of Underlying Securities	ot require alid OMB of Owned and of ng s and 4)	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Nature of Indire Beneficie Ownersl (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date any	e.g., puts, cal 4. 4. if Transacti Code ear) (Instr. 8)	ion of Do See A. (A D of (II an	Arrants, Number Perivative ecurities cquired A) or Pisposed f (D) nstr. 3, 4	conta form	ined in displays posed of, convertil Exercisa piration I /Day/Yea	this for a cur , or Ber ble secu ble Date par)	rently vaneficially rities) 7. Title a Amount of Underlying Securities	oot require alid OMB of Owned and of ng s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Nature of Indire Beneficie Ownersl (Instr. 4)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Saks Samuel R C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 306 NEW YORK, NY 10022	X					

Signatures

/s/Jessica Morris, Attorney-in-Fact	05/31/2016
**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) Each restricted stock unit represents the right to receive, at settlement, one share of common stock.
- (2) These restricted stock units are scheduled to vest 100% on May 27,2017.
- (3) The restricted stock units were granted pursuant to the Issuer's 2016 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.