# FORM 4

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

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

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

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 *- Rhodes John B			2. Issuer Name <b>and</b> Ticker or Trading Symbol Tonix Pharmaceuticals Holding Corp. [TNXP]					1	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			HOLDING	3. Date of Earliest Transaction (Month/Day/Year) 05/27/2016						_^		ve title below)		ner (specify bel	ow)
(Street) NEW YORK, NY 10022			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own					ned						
1.Title of Se (Instr. 3)	ecurity	Γ	Date Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date,	if Code (Inst	2	(A) c	curities Accor Disposed r. 3, 4 and 5	of (D) Ow Tra		wing Report	-	Ownership Form:	Beneficial Ownership
Reminder: R								Persons v contained form disp	in this for	rm are not	t require	d to respo	nd unless		1474 (9-02)
Reminder: R			Table II F	Namisrativa (		itiaa Aa		contained form disp	in this for	rm are not rently vali	t require id OMB c	d to respo	nd unless		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date,	4. Transac Code	tion (	warrant 5. Numb of Derivative Securitie Acquired (A) or Disposed (D)	quires, oper	contained	in this for lays a curred of, or Ben ertible securous recisable ion Date	rm are not rently vali eficially O	t require id OMB c wned d f	d to respo ontrol nur	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	of 10. Owners: Form of Derivati Security Direct ( or Indirects)	11. Natrof Indir Benefic Owners: (Instr. 4
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## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Rhodes John B 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.