FORM 4

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

OMB APPROVAL					
DMB Number:	3235-02	287			
Estimated average burden					
ours per response)	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

Print or Ty	pe Response	:s)																	
1. Name and Address of Reporting Person * MARIO ERNEST				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				11/2	3. Date of Earliest Transaction (Month/Day/Year) 11/23/2016								r (give title belo	w)		pecify belo	w)		
		(Street)		4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							ual or Joint/		ng(Check	Applicable	Line)			
NEW VODY NV 10022										_X_Form filed by One Reporting PersonForm filed by More than One Reporting Person									
NEW YORK, NY 10022 (City) (State) (Zip)					Table I - Non-Derivative Securities Acqui						ired, Disp	red, Disposed of, or Beneficially Owned							
1.Title of S (Instr. 3)	(Instr. 3) Date (Month/Day/Year)		Execut any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		ion	4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities lly Owned Following Transaction(s)		Ownership Inc Form: Be		eneficial		
				(IVIOIIII	I/Day/ IV	carj	Cod	le	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		or Indi (I) (Instr.	rect (In	· .		
Common value	Stock, \$0.	001 par	11/23/2016				P			120,000	A	\$ 0.405	120,000			I	and Mi Ma Re	By Ernest and Mildred Mario Revocable Trust	
Common value	Stock, \$0.	001 par											630,724			D			
Reminder:	Report on a	separate line	for each class of se	curities	beneficia	ally	owned	dire	ctly	or									
									con	tained i	n this f	orm a	re not req	ction of in uired to re d OMB cor	spond u	nless	SEC	1474 (9-02)	
			Table II -					quire	d, D	Disposed (of, or B	enefici	ally Owned						
1. Title of	2	3. Transact	ion 3A. Deeme		uts, calls	s, wa			1	s, conver			Fitle and	8. Price of	9 Number	r of 10		11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise (Month/Da) Price of		Execution I y/Year) any	Date, if	ate, if Transaction Code (Year) (Instr. 8)		of Derivative Securities		and Expiration Date (Month/Day/Year)		An Un Sec	nount of derlying curities	Derivative Security (Instr. 5)	Derivative Securities Beneficial	tive Of Forcially D	vnership rm of crivative	of Indirect Beneficial Ownership		
	Derivative Security						Acqui (A) of Dispo of (D) (Instr 4, and	r sed)		(In 4)		str. 3 and		Owned Following Reported Transactio (Instr. 4)	on(s) Di	curity: rect (D) Indirect astr. 4)	(Instr. 4)		
					Code	V	(A)	(D)	Da Exc	te ercisable	Expirat Date	ion Tit	Amount or Number of Shares						
							Ľ	. ,											

Reporting Owners

Properties Openson Name / Additions	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MARIO ERNEST C/O TONIX PHARMACEUTICALS HOLDING CORP. 509 MADISON AVENUE, SUITE 306 NEW YORK, NY 10022	X						

Signatures

/s/ Jessica Morris, Attorney-in-Fact	11/28/2016
**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).

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.