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

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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).

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)														
Name and Address of Reporting Person * LEDERMAN SETH			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 X_ Officer (give title below)				
(Last) (First) (Middle) C/O TONIX PHARMACEUTICALS HOLDING CORP, 509 MADISON AVE.,			3. Date of Earliest Transaction (Month/Day/Year) 06/19/2017											
SUITE 306 (Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 6.							6. Individual or Joint/Group Filing(Check Applicable Line)				
NEW YORK, NY 10022									_X_ Form fil	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State)	(Zip)			Table I -	· Non-	-Derivativ	ve Sec	urities A	Acquired, Disp	osed of, or F	Beneficially Ov	vned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	ned Date, if	3. Transact Code	ion		ties A ispose	cquired d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I)	7. Nature o		
				Code	V	Amount	(D)	Price			(Instr. 4)			
Common Stock, \$0.001 par value	06/20/2017			P		20,000	A	\$ 4.22 (1)	20,000		I	By IRA a	ccount	
Common Stock, \$0.001 par value									13,300		I	By 401(k)) plan	
Common Stock, \$0.001 par value									7,912		D			
Common Stock, \$0.001 par value									3,100		I	By spouse	e	
Common Stock, \$0.001 par value									2.917		I	By Leder Laborator Inc. (2)	ries,	
Common Stock, \$0.001 par value									2,917		I	By Starlir Pharmace Inc. (2)		
Common Stock, \$0.001 par value									18,463		I	By Leder Co., LLC		
Common Stock, \$0.001 par value									3,246		I	By L&L Technolog LLC (2)	gies,	
Common Stock, \$0.001 par value									5,898		I	By Target Pharmace LLC (2)		
Reminder: Report on a separate	line for each class of	securities	beneficia	lly owne	d dire	ctly or								
indirectly.						containe	d in	this for	nd to the colle m are not req currently valid	uired to re	spond unles	s	1474 (9- 02)	
	Table								eficially Owned	I				
. Title of 2. 3. Transaction 3A. Deemed		med on Date, if	4. 5. Number of Code Derivative			and Expiration Date (Month/Day/Year) An Un Se			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Title and mount of inderlying curities astr. 3 and str. 3 and str. 4 and 5 and		Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia	
						Date Exercisa		xpiration	Amount or Title Number					

of

Shares

Exercisable Date

(A) (D)

Reporting Owners

Powerfus Comment Addition		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LEDERMAN SETH C/O TONIX PHARMACEUTICALS HOLDING CORP 509 MADISON AVE., SUITE 306 NEW YORK, NY 10022	X		Chief Executive Officer				

Signatures

/s/ Jessica Morris, Attorney-in-Fact	06/20/2017
**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 (1) \$4.220019425. The range of purchase prices on the transaction date was \$4.13 to \$4.25 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.
- (2) Reporting person may be deemed to be a control person of this entity.

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.