FORM	4	

(Brint or Type Been

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

(Thin of Type Respons	(0)										
1. Name and Address of Saks Samuel R	2. Issuer Name an Tonix Pharmaceu			· ·		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) C/O TONIX PHAR CORP., 509 MADI		S HOLDING	3. Date of Earliest T 06/20/2017	ransaction (Mon	th/Day/Y	ear)	Officer (give title below) O	her (specify belo	ow)	
NEW YORK, NY		4. If Amendment, D	ate Original	Fileo	d(Month/Da	y/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				
(City)	(State)	(Zip)	Т	able I - Nor	1-Dei	ivative S	ecurities	s Acqu	ired, Disposed of, or Beneficially Ow	ned	
1. Title of Security		2. Transaction	2A. Deemed 3. Transaction 4. Securities Acquired					5. Amount of Securities Beneficially	6.	7. Nature	
(Instr. 3)		Date	Execution Date, if	Code		(A) or Disposed of (D)		of (D)	Owned Following Reported	Ownership	of Indirect
		(Month/Day/Year)	any	(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial
			(Month/Day/Year)						(Instr. 3 and 4)	Direct (D)	Ownership
										or Indirect	(Instr. 4)
							(A) or			(I)	
				Code	V	Amount	(D)	Price		(Instr. 4)	

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

 Persons who respond to the collection of information 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, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numb	ber	6. Date Exerc	isable and	7. Title and	l	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of I		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
		(Month/Day/Year)		Code				(Month/Day/Year)		Underlying		Security			Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securities						· /	-	Derivative	1
	Derivative					-	-		(Instr. 3 and 4)					(Instr. 4)	
	Security						(A) or				0	Direct (D)			
						Disposed of						Reported Transaction(s)	or Indirect		
						(D) (Instr. 3, 4,							· · · · · · · · · · · · · · · · · · ·	(1) (Instr. 4)	
						and 5) $(1130.5, 4)$							(111501.4)	(11301. 4)	
											Amount				
								Date	Expiration		or				
								Exercisable	Date	Title	Number				
				Celle	v						of				
-		-	-	Code	v	(A)	(D)				Shares				
Stock	\$ 4.18	06/20/2017		А		20.000		06/20/2018	06/20/2027	Common Stock	20.000	\$ 0 <u>(1)</u>	20.000	D	
Option	φ -1.10	00/20/2017		Α		20,000		00/20/2018	00/20/2027	Stock	20,000	301	20,000	D	

Reporting Owners

Demosting Ormers Name / Address	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	Х						

Signatures

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) The option was granted pursuant to the Issuer's 2017 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.