FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
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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

1. Name and Address of Reporting Person *- Beever Charles				2. Issuer Name and Ticker or Trading Symbol REXAHN PHARMACEUTICALS, INC. [RNN]							[RNN	1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O REXAHN PHARMACEUTICALS, INC., 15245 SHADY GROVE ROAD, SUITE 455				3. Date of Earliest Transaction (Month/Day/Year) 04/11/2017)	_^	Officer (give	title below)		(specify below)	
ROCKVILLE, MD 20850			4. If Amendment, Date Original Filed(Month/Day/Year)							ear)	_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(Cit	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							Acquired	ired, Disposed of, or Beneficially Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		Execution Date, if Code			(A) (In	A) or Disposed of nstr. 3, 4 and 5) (A) or (A) or (D)		of (D) Own Tran	Owned Following Reported Transaction(s) (Instr. 3 and 4)		d O Fo D or (T	wnership of orm: Be irect (D) Ov Indirect (Ir	eneficial wnership				
			Table II -			Securities alls, warr		in t dis uired, E	his fo plays pispos	orm are a curre	not reently v	equired to valid OME ficially Ow	respond control i	unless th	tion containe e form		()
Security (Instr. 3)	Conversion	ise (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exerc Expiration Da (Month/Day/		ercisable and Date y/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercis	able	Expira Date	tion	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 0.618	04/11/2017		A		110,000		04/11	/2018	04/11	/2027	Common Stock	110,000	\$ 0	110,000	D	

Reporting Owners

Barrandina Orana Nama / Addina	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Beever Charles C/O REXAHN PHARMACEUTICALS, INC. 15245 SHADY GROVE ROAD, SUITE 455 ROCKVILLE, MD 20850	X						

Signatures

/s/ Tae Heum Jeong, as attorney-in-fact for Charles Beever	04/12/2017
**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).

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.