FORM 4

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

OMB APPROVAL
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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

	pe Response																
Name and Address of Reporting Person * Beever Charles				2. Issuer Name and Ticker or Trading Symbol REXAHN PHARMACEUTICALS, INC. [RXHN]								NI I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		(First) ARMACEUTICA ER DRIVE	(Middle) LS, INC., 9620	3. Date of 06/11/2			ansac	ction (N	Month/Da	y/Yea	ar)	x_	_ Director Officer (give	title below)		Owner er (specify below)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							Year)	_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
ROCKVILLE, MD 20850 (City) (State) (Zip)				Tabla I Nan Davivativa Securities Assuri									ired, Disposed of, or Beneficially Owned				
													5. Amount of Securities Beneficially 6. 7. Nature				
(Instr. 3) Date			Execution Dat		Date, if	Oate, if Code (Instr		e (A		isposed of 4 and 5) (A) or	(Inst	Owned Following Reported Or Transaction(s) Fc (Instr. 3 and 4) Di or (I)		Ownership of Form: Direct (D) or Indirect (I)	f Indirect eneficial wnership		
							Co	ode	V An	ount	(D) I	Price				(Instr. 4)	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	(e.g., puts, calls, value) 4. 5. No Transaction of Code Derivative (Instr. 8) Security (A) of Code (A			Number 6. Exerivative eccurities cquired (A) or		piration Date onth/Day/Year)		cially Own ies) 7. Title an Amount of Underlyin Securities	uired to respond lid OMB control r ially Owned		9. Number of Derivative Securities Beneficially Owned Following	Ownershi Form of Derivativ Security: Direct (D	11. Nature p of Indirect Beneficial Ownership (Instr. 4)	
						Disposed of (D) (Instr. 3, 4, and 5)		Date Exerc	isable	Expiration		Title	Amount or Number		Reported Transaction(s) (Instr. 4)	or Indirec (I) (Instr. 4)	t
				Code	V	(A)	(D)						of Shares				
Stock Option (Right to Buy)	\$ 1.2							05/01	1/2007 <mark>(1</mark>	05/	/01/2016	Commo Stock	n 20,000		20,000	D	
Stock Option (Right to Buy)	\$ 1.4	06/11/2007		A		20,000		06/11	1/2008	06/	/11/2017	Commo Stock	n 20,000	\$ 0	20,000	D	

Reporting Owners

Donostino Ossar Norma / Addisor	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Beever Charles C/O REXAHN PHARMACEUTICALS, INC. 9620 MEDICAL CENTER DRIVE ROCKVILLE, MD 20850	X					

Signatures

/s/ Tae Heum Jeong, as attorney-in-fact for Charles Beever	06/13/2007
**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) Options fully vest on the first anniversary of the date of grant.

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.