FORM 4	4
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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).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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 Per Ahn Chang Ho	2. Issuer Name and Ticker or Trading Symbol REXAHN PHARMACEUTICALS, INC. [RNN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner			
(Last) (First) C/O REXAHN PHARMACEUT INC., 15245 SHADY GROVE R 455		3. Date of Earliest Transaction (Month/Day/Year) 05/18/2011					X Officer (give title below) Other (specify below) Chairman & CEO			
(Street) ROCKVILLE, MD 20850	4. If Amendment, Date Original Filed(Month/Day/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)	Та	ble I - Nor	n-Dei	rivative Secu	ırities	Acqui	red, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial
	C	(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 05	5/18/2011		Р		1,008,078	А	\$ 1.31 (1)	11,338,924	D	
Common Stock								500,000	I	Owned by spouse (2)
Reminder: Report on a separate line for indirectly.	r each class of sect	urities beneficially	owned dire	- -		respo	nd to	the collection of information	ı S	EC 1474 (9-

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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. Nu	mber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Deriv	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Secur	ities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acqui	ired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					(A) 01				4)			0	Direct (D)	
						Dispo							*	or Indirect	
						of (D)							Transaction(s)	< /	
						(Instr.	· ·						(Instr. 4)	(Instr. 4)	
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excretisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ahn Chang Ho C/O REXAHN PHARMACEUTICALS, INC. 15245 SHADY GROVE ROAD, SUITE 455 ROCKVILLE, MD 20850	Х	Х	Chairman & CEO				

Signatures

/s/ Tae Heum Jeong for Chang H. Ahn	05/20/2011
Signature of Reporting Person	Date

Explanation of Responses:

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

On May 18, 2011, the reporting person acquired 1,008,078 shares from a family trust in full satisfaction of an existing indebtedness of that trust to the reporting person in (1) the amount of \$1,320,581.86. A third party is the trustee of the trust, and the reporting person does not have any voting or dispositive power with respect to the shares held by the trust.

(2) Includes 500,000 shares owned by the reporting person's wife, as to which the reporting person disclaims beneficial ownership.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).