# FORM 4

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

OMB APPROVAL						
OMB Number:	3235-028	7				
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nours per response	e 0.	5				

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 Ty	pe Response	(S)															
Name and Address of Reporting Person * Suzdak Peter David				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 10% Owner					
(Last) (First) (Middle) C/O REXAHN PHARMACEUTICALS, INC., 15245 SHADY GROVE ROAD, SUITE 455			03/18	3. Date of Earliest Transaction (Month/Day/Year) 03/18/2016								X Officer (give title below) Other (specify below)  Chief Executive Officer					
(Street)			4. If A	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					
	LLE, MD												_ rom me	d by More than	One Reporting I	rerson	
(City	)	(State)	(Zip)		7	abl	e I - Non	-Dei	ivative S	ecurit	ies A	cquir	ed, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	ar) any	ion Date,	if (	Code (Instr. 8)		on 4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5)		ed of (	of (D) Benef Repor		mount of Securities eficially Owned Following orted Transaction(s)		Ownership of Form:	V. Nature of Indirect Beneficial
				(Montr	/Day/Year)	ar)	Code	V	Amount	(A) or (D)	Pri		(Instr. 3	and 4)			Ownership (Instr. 4)
Common	Stock		03/18/2016				A		60,000	A	\$ 0.32 (1)	231	60,000			D	
Reminder: indirectly.	Report on a	separate line	for each class of	securities b	peneficial	ly ov		Per	sons wh	n this	form	n are	not req	uired to re	oformation espond unl ntrol numb	ess	EC 1474 (9- 02)
			Table I	I - Derivat ( <i>e.g.</i> ., pu	tive Secur								y Owned	I			
	Conversion	3. Transaction Date (Month/Day	Year) Execution any	ned and Date, if	4. Transaction Code (Instr. 8)		. Numbe f	r 6. Date Exercis and Expiration e (Month/Day/Y		cisable on Dat	sable n Date Year)		le and int of rlying ities . 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form of Derivative Security: Direct (D) or Indirec	Beneficial Ownership (Instr. 4)
					Code	v (	(A) (D)	Da Ex		Expira Date	ation	Title	Amount or Number of Shares				
Repor	ting O	wners			•	_					•						
							Relatio	nshi	ps								
Reporting Owner Name / Address		Director	Director 10% Owner Office				Othe			Other							
C/O REX			TICALS, INC D, SUITE 455	. X			Chie	f Ex	ecutive (	Offic	er						

### **Signatures**

ROCKVILLE, MD 20850

/s/ Tae Heum Jeong, as attorney -in-fact for Peter D. Suzdak	03/21/2010	
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).

price.

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.