## FORM 4

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

OMB APPRO	<b>VAL</b>
OMB Number:	3235-0287
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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 Nome o															
Name and Address of Reporting Person *  Nolan Lisa				2. Issuer Name and Ticker or Trading Symbol REXAHN PHARMACEUTICALS, INC. [RNN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 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) 07/06/2016							X Officer (give )		Other Business Offic	(specify below er	r)
(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 PersonForm filed by More than One Reporting Person				
(Ci	ty)	(State)	(Zip)		,	Γable I	- Non-De	rivative S	ecuritie	s Acquire	ed, Disposed o	f, or Benef	icially Owned		
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea		Execution Date, if		Code (Instr.		(A) or Di	4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5) (A) or Amount (D)		Amount of Se bwned Followin ransaction(s) instr. 3 and 4)		, F I C (	orm: Direct (D) r Indirect	Beneficial Ownership		
Reminder:	Report on a	separate line for eac	h class of securities	beneficia	illy owned di	rectly or	Perso	ns who			collection of				1474 (9-02)
Reminder:	Report on a	separate line for eac		- Deriva	tive Securiti	es Acqu	Perso in this a curr	ons who is form ar rently val	e not r lid OM or Bene	equired B contro	to respond ι ol number.				1474 (9-02)
			Table II	- Deriva	tive Securiti	es Acqu	Perso in this a curi a curi	ons who is form ar rently val	e not r lid OM or Bene le secur	equired B contro eficially O ities)	to respond unlander.	inless the	form displa	ys	· , ,
1. Title of	2. Conversion	3. Transaction	Table II  3A. Deemed Execution Date, if	- Deriva (e.g., pu 4. Transact Code	tive Securitiuts, calls, was 5. Numblicion Derivatiin Securitii	es Acquerrants, per of ve es d (A) or d of (D)	Perso in this a curred, Dis options, o 6. Date E Expiratio (Month/I	ons who is form arently valued of, of convertible exercisable	re not r lid OM or Bene le secur e and	required B contro eficially O ities) 7. Title a	to respond upl number.  Dwned  and Amount of ng Securities	8. Price of	9. Number o Derivative Securities Beneficially Owned Following Reported	7 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Naturip of Indire Benefici ve Ownersl: (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II  3A. Deemed Execution Date, if any	- Deriva (e.g., pu 4. Transact Code	tive Securitiuts, calls, wa 5. Numl Derivati Securitic Acquire Dispose (Instr. 3	es Acquerrants, per of ve es d (A) or d of (D)	Perso in this a curi dired, Dis options, o 6. Date E Expiratio (Month/I	posed of, convertible con Date	re not r lid OM or Bene le secur e and	required B contro eficially O ities) 7. Title as Underlyin	to respond upl number.  Dwned  and Amount of ng Securities	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following	7 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Nature of Indire Benefic: Owners! (Instr. 4

#### **Reporting Owners**

Donating Commun Name / Addison	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Nolan Lisa C/O REXAHN PHARMACEUTICALS, INC. 15245 SHADY GROVE ROAD, SUITE 455 ROCKVILLE, MD 20850			Chief Business Officer			

### **Signatures**

/s/ Tae Heum Jeong, as attorney-in-fact for Lisa Nolan	07/08/2016
**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) One quarter of the option vests and becomes exercisable on July 6, 2017, and, thereafter, 1/36th of the remaining option vests in equal installments on the first business day of each month following such date until fully vested.

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.