# FORM 4

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

OMB APPROVAL

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Estimated average burden
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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

| (Finit of Type  | e Kesponses)  |            |   |   |   |                   |  |  |   |                     |  |                 |   |   |   |  |  |             |
|---|---|------------|---|---|---|-------------------|--|--|---|---------------------|--|-----------------|---|---|---|--|--|-------------|
| Name and Address of Reporting Person  Hoffmann Bernhard     |   |            |   | 2. Issuer Name and Ticker or Trading Symbol<br>Ocuphire Pharma, Inc. [OCUP] |   |                   |  |  |   |                     |  |                 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |   |   |  |  |             |
| (Kast) (First) (Middle)<br>37000 GRAND RIVER AVE, SUITE 120 |   |            |   | 3. Date of Earliest Transaction (Month/Day/Year) 11/05/2020                 |   |                   |  |  |   |                     |  |                 | X Officer (give title below) Other (specify below)  VP of Corp. Dev. and Secretary          |   |   |  |  |             |
| (Street) FARMINGTON HILLS, MI 48335                         |   |            |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                        |   |                   |  |  |   |                     | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person |                 |   |   |   |  |  |             |
| (City)  |   | (State)    | (Zip)   |   |   | т                 | able I   | - Non-                                 | Deriv   | ative Se            | ecurities  | s Acqui         | red I   | )isnosed (  | of or Renet   | ficially Owne  | ď                                      |             |
| 1.Title of Security 2. Transaction                          |   |            |   | 2A. Deemed 3. Transac   |   |                   |  |  |   |                     |  |                 | 5. Amount of Securities Beneficially  |   |   |  |  | 7. Nature   |
| (Instr. 3) Date (Month/Day/Year                             |   |            | Execution Date, if<br>any<br>(Month/Day/Year) |   | ( | (Instr. 8)        |  | (A) or Disposed of (Instr. 3, 4 and 5) |   |                     | f (D) Owned Fol<br>Transaction<br>(Instr. 3 and  |                 | saction(s)  |   |   | Ownership<br>Form:<br>Direct (D)                               | of Indirect<br>Beneficial<br>Ownership |             |
|   |   |            |   | (iviolitili Day/ Tear)  |   | r car)            | Code   | Code V                                 |   | mount               | (A) or<br>(D)  | Price           |   |   |   |  | or Indirect (I) (Instr. 4)             |             |
| Common Stock 11/05/2020                                     |   |            | 11/05/2020                                    |   |   |                   | A  |  | 10  | 0,120               | A  | (1)             | 100,  | 120   |   |  | D                                      |             |
|   |   |            | Table II -                                    | Derivati<br>(e.g., put  |   |                   |  | in that a cu                           | his fo<br>urren<br>Dispos                                 | orm are<br>tly vali | not re<br>d OMB<br>r Benef   | quired<br>contr | l to re<br>ol nu  | espond ι<br>mber.                                   |   | on containe<br>form displa                                     |  | 1474 (9-02) |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |            |   | f Transaction of Do<br>Code Secu<br>(Instr. 8) Acqu<br>or Do<br>of (I       |   | Securit<br>Acquir | perivative Expurities (Mourities uired (A) pisposed D) tr. 3, 4, |  | Date Exercisable and<br>spiration Date<br>fonth/Day/Year) |                     | 7. Title and<br>of Underlyin<br>Securities<br>(Instr. 3 and  |                 | ng  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s | Owners<br>Form o<br>Derivat<br>Securit<br>Direct (<br>or Indir | Ownersh<br>(Instr. 4)<br>D)<br>ect     |             |
|   |   |            |   | Code  | V | (A)               | (D)  | Date<br>Exerci                         | isable  | Expira<br>Date      | tion   | Title           |   | Amount<br>or<br>Number<br>of<br>Shares              |   | (Instr. 4)   | (Instr. 4                              |             |
| Employee<br>Stock<br>Option<br>(right to<br>buy)            | \$ 0.90   | 11/05/2020 |   | A   |   | 42,86             | 7  | Ω                                      | <u>2)</u>   | 10/01               | /2028  | Com             |   | 42,867  | (1)   | 42,867   | D                                      |             |
| Employee<br>Stock<br>Option<br>(right to<br>buy)            | \$ 1.21   | 11/05/2020 |   | A   |   | 30,11             | 0  | Ω                                      | <u>3)</u>   | 12/27               | 7/2029   | Com             | mon<br>ck   | 30,110  | (1)   | 30,110   | D                                      |             |
| Employee<br>Stock<br>Option<br>(right to<br>buy)            | \$ 1.65   | 11/05/2020 |   | A   |   | 4,226             | 5  | Ĺ                                      | <u>4)</u>   | 06/30               | )/2020   | Com             |   | 4,226   | (1)   | 4,226  | D                                      |             |

# **Reporting Owners**

|   |          | Relationships |                                |       |  |  |  |  |  |  |
|---|----------|---------------|--------------------------------|-------|--|--|--|--|--|--|
| Reporting Owner Name / Address  | Director | 10%<br>Owner  | Officer                        | Other |  |  |  |  |  |  |
| Hoffmann Bernhard<br>37000 GRAND RIVER AVE<br>SUITE 120<br>FARMINGTON HILLS, MI 48335 |          |               | VP of Corp. Dev. and Secretary |       |  |  |  |  |  |  |

### **Signatures**

| /s/ Emily J. Johns, by Power of Attorney | 11/09/2020 |
|--|------------|
| **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).
- The reporting person acquired the shares and options to acquire shares of the common stock of Rexahn Pharmaceuticals, Inc. ("Rexahn") on November 5, 2020, in exchange for shares and options to acquire shares of the common stock of Ocuphire Pharma, Inc. ("Ocuphire"), pursuant to the Agreement and Plan of Merger and Reorganization, dated as of June 17, 2020, as
- (1) amended, between Rexahn, Razor Merger Sub, Inc. and Ocuphire pursuant to which Ocuphire became a wholly-owned subsidiary of Rexahn. Per the terms of the Merger Agreement, each share of Ocuphire common stock was converted into the right to receive 1.0565 shares of Rexahn common stock. Subsequent to the merger, the name of the issuer was changed from Rexahn Pharmaceuticals, Inc. to Ocuphire Pharma, Inc.
- (2) The option is fully vested
- (3) 3,486 shares vested on December 31, 2019, and the remaining shares vest in equal monthly installments from January 2020 through December 2021, subject to continued service.
- (4) 1,373 shares vested on June 30, 2020, and the remaining shares vest in equal monthly installments from July 2020 through December 2021, subject to continued service.

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.