

FORM 3

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

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response...	0.5

INITIAL STATEMENT OF 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 Type Responses)

1. Name and Address of Reporting Person * Tsuchimoto Kim R (Last) (First) (Middle) C/O MONOPAR THERAPEUTICS INC., 1000 SKOKIE BLVD., SUITE 350 (Street) WILMETTE, IL 60091 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/08/2018	3. Issuer Name and Ticker or Trading Symbol Monopar Therapeutics [NONE]	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Chief Financial Officer	5. If Amendment, Date Original Filed(Month/Day/Year)
		6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock options	(1)	(1)	Common stock	21,000	\$ 0.001	D	
Stock options	(2)	(2)	Common stock	23,520	\$ 0.001	D	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Tsuchimoto Kim R C/O MONOPAR THERAPEUTICS INC. 1000 SKOKIE BLVD., SUITE 350 WILMETTE, IL 60091			Chief Financial Officer	

Signatures

/s/ Kim R. Tsuchimoto

01/08/2018

Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

Reflects the issuance of options to purchase up to 21,000 shares of common stock granted to Ms. Tsuchimoto on April 4, 2016 for her
(1) services as an officer of Monopar Therapeutics. The options vested 50% upon grant date, 25% upon the 6-month anniversary of grant date, and 25% upon the 1-year anniversary of grant date. The options each expire on April 3, 2026.

Reflects the issuance of options to purchase up to 23,520 shares of common stock granted to Ms. Tsuchimoto on February 20, 2017 for
(2) her services as an officer of Monopar Therapeutics. The options vest 6/48ths on the six-month anniversary of the grant date and 1/48th on each subsequent one-month anniversary thereafter. The options each expire on February 19, 2027.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

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