| FORM 4 | |
|----------------------|--|
| Check this box if no | |

(Print or Type Responses)

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

Ations *b. See* 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 Reportin RIOUX PATRICE | 2. Issuer Name and Ticker or Trading Symbol Monopar Therapeutics [NONE] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
|---|---|--|--------------------|--|---|--|---|---|--|-------------------------|--|
| (Eirst) (First) 1000 SKOKIE BLVD, STE | | 3. Date of Earliest Transaction (Month/Day/Year) 12/30/2018 | | | | | | Officer (give title below) Other (specify below) Acting Chief Medical Officer | | | |
| (Street) WILMETTE, IL 60091 | 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) | Table I - Non-Derivative Securities Acqui | | | | | | ired, Disposed of, or Beneficially Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | Execution Date, if | Code (Instr. 8) | | (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or | | f(D) | Transaction(s) (Instr. 3 and 4) | | Beneficial Ownership | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

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. Number 6. Date Exercisable and | | | 7. Title and 8. Price of | | 9. Number of | 10. | 11. Nature | | |
| Derivative | Conversion | Date | Execution Date, if | Transact | ion | of | of Expiration Date | | | Amount of | | Derivative | Derivative | Ownership | of Indirect |
| | | (Month/Day/Year) | | Code | | | Derivative (Month/Day/Year) U | | Underlying S | | Security | | | Beneficial | |
| · · · · · · | Price of | | (Month/Day/Year) | (Instr. 8) |) | Securitie | | | No. | | · / | - | Derivative | 1 | |
| | Derivative | | | | | Acquire | d | | | (Instr. 3 and 4) | | | | 2 | (Instr. 4) |
| | Security | | | | | (A) or | 1 0 | | | | | | 0 | Direct (D) | |
| | | | | | | Dispose | d of | | | | | | Reported Transaction(s) | or Indirect | |
| | | | | | | (D) (Instr. 3, | 4 | | | | | | | (I) (Instr. 4) | |
| | | | | | | and 5) | , т, | | | | | | (1130.4) | (111301. 4) | |
| | | | | 1 | | , | | | | | Amount | | | | |
| | | | | | | | | | - · .· | | or | | | | |
| | | | | | | | | Date Exercisable | Expiration | Title | Number | | | | |
| | | | | | | | | Exercisable | Date | | of | | | | |
| | | | | Code | V | (A) | (D) | | | | Shares | | | | |
| Stock | ¢.(| 12/20/2018 | | | | 20.000 | | 01/31/2019(1) | 10/20/2020 | Common | 20.000 | ¢.0 | 20.000 | D | |
| option | \$ 6 | 12/30/2018 | | А | | 20,000 | | 01/31/2019 | 12/30/2028 | stock | 20,000 | \$ 0 | 20,000 | D | |

Reporting Owners

| | Relationships | | | | | | | |
|--|---------------|-----------|---------|------------------------------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| RIOUX PATRICE 1000 SKOKIE BLVD, STE 350 WILMETTE, IL 60091 | | | | Acting Chief Medical Officer | | | | |

Signatures

| /s/ Kim R. Tsuchimoto, Attorney-in-fact | 01/25/2019 |
|---|------------|
| **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) Stock options vest and become exercisable according to the following schedule: 1,667 shares vest on January 31, 2019 and the last day of each subsequent month thereafter.

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.