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

OIVID AFFROV	AL					
OMB Number:	3235-0287					
Estimated average burden						
hours per response	0.					

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 Type	e Responses)														
Name and Address of Reporting Person * Robinson Chandler				2. Issuer Name and Ticker or Trading Symbol Monopar Therapeutics [MNPR]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 1000 SKOKIE BLVD, SUITE 350				3. Date of Earliest Transaction (Month/Day/Year) 02/02/2022							X Officer (give title below) Other (specify below) Chief Executive Officer				
(Street)				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				
WILMET	TE, IL 600	91								_	Form fried by N	iore man One K	cporting reison		
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acqu						es Acquir	nired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if any (Month/Day/Year)		Date, if (4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D) C	Amount of Security Amount of Sec	ecurities Beneficially ng Reported		Ownership Form:	7. Nature of Indirect Beneficial Ownership		
			(Monul/Day/1)		y/ i cai)	Cod	e V A	(A) or (D)	`	su. 3 anu 4)		((Instr. 4)	
Kemmuel. K	eport on a sej	parate line for each of		- Derivat	tive	Securities	Acqı	Person in this a curre	s who respon form are not r ntly valid OMI	equired f B contro	to respond u I number.				474 (9-02)
1 T:41 £	2.	3. Transaction	24 D		its, c			1.	nvertible secur		1	0 D.:	9. Number of	f 10.	11 N-t
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Der Code Sec (Instr. 8) Acc or I (D) (Instr. 8)		5. Numb Derivative Securitie Acquired or Dispose (D) (Instr. 3, and 5)	titive tites (Month posed of 3, 4,		ercisable and Date ay/Year)	7. Title of Unde Securiti (Instr. 3	s		Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivativ Security: Direct (I or Indire	(Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration e Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Options	\$ 2.8	02/02/2022		A		211,013	8	(1)	02/01/2032	Comm	1711 018	\$ 0	211,018	D	
Restricted Stock Units	\$ 0	02/02/2022		A		159,522	2	(2)	(2)	Comm	1159 522	\$ 0	220,264	D	
Report	ing Ov	vners													

Donordina Oroman Name /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Robinson Chandler 1000 SKOKIE BLVD SUITE 350 WILMETTE, IL 60091	X		Chief Executive Officer				

Signatures

/s/Kim R. Tsuchimoto, Attorney-in-fact	02/04/2022
**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) Options vest 6/48ths on June 30, 2022 and 1/48ths per month thereafter.
- (2) RSUs vest 6/48ths on June 30, 2022 and 3/48ths per quarter thereafter (September 30, 2022, December 31, 2022, March 31, 2023, June 30, 2023, September 30, 2023, December 31, 2023, March 31, 2024, June 30, 2024, September 30, 2024, December 31, 2025, June 30, 2025, December 31, 2025, December 3

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.